



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year: **2018**

**Non-Profit Corporation**

- Filing period: June 1 - June 30  
→ Filing Fee: \$20.00  
→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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SECRETARY OF STATE  
CORPORATIONS DIV

2018 JUL 27 AM 9:47

1. Entity ID Number <b>153034</b>		2. Exact name of the Corporation <b>Asociacion Ecuatoriana De Rhode Island</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Help strengthen and unite the Community</b>			
4. NAICS Code <b>813319 - Other Social Advoc</b>					
6. Principal Office Address <b>18 Birch St.</b>		City <b>East Providence</b>		State <b>RI</b>	Zip <b>02914</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Carolina Briones</b>			Vice-President Name <b>none</b>		
Street Address <b>18 Birch St.</b>			Street Address		
City <b>East Providence</b>	State <b>RI</b>	Zip <b>02914</b>	City	State	Zip
Secretary Name <b>Piedad Aleman</b>			Treasurer Name <b>Julio Regalado</b>		
Street Address <b>119 Alverson Ave.</b>			Street Address <b>26 River St.</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Jaime Salinas</b>			Director Name <b>Bruno Sukys</b>		
Street Address <b>160 Harold St.</b>			Street Address <b>12 Preston Ave.</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
Director Name <b>Ericka Moore</b>			Director Name		
Street Address <b>159 Vermont Ave.</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</b>	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee					
Name of Officer/Authorized Representative <b>Carolina Briones</b>				Date <b>7/26/2018</b>	
Signature of Officer/Authorized Representative <i>Carolina Briones</i>				SIGN DOCUMENT HERE	

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

**FILED**

JUL 27 2018

BY CU 335741

FORM 631 - Revised: 11/2017