



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: **2019**

## 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.

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV  
2019 MAY 15 AM 11:21

1. Entity ID Number <b>000155521</b>		2. Exact name of the Corporation <b>IGLESIA PENTECOSTAL VISION EVANGELICA</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>CHURCH</b>			
4. NAICS Code <b>813110 - Religious Organ</b>					
6. Principal Office Address <b>1014 BROAD ST</b>			City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02905</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>ISRAEL MERCEDES</b>			Vice-President Name		
Street Address <b>66 COMMODORE STREET</b>			Street Address		
City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02904</b>	City	State	Zip
Secretary Name <b>PATRICIA BOLIVAR</b>			Treasurer Name <b>GEIDY NOLASCO</b>		
Street Address <b>417 PINE STREET</b>			Street Address <b>64 FLORA STREET</b>		
City <b>CENTRAL FALLS</b>	State <b>RI</b>	Zip <b>02863</b>	City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02904</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>HUGO LOPEZ</b>			Director Name <b>NICOLAS PENA</b>		
Street Address <b>10 ALICE STREET</b>			Street Address <b>417 PINE STREET</b>		
City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>CENTRAL FALLS</b>	State <b>RI</b>	Zip <b>02863</b>
Director Name <b>MINERVA QUIROZ</b>			Director Name		
Street Address <b>935 PONTIAC AVENUE</b>			Street Address		
City <b>CRANSTON</b>	State <b>RI</b>	Zip <b>02920</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>					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</small>					
Name of Officer/Authorized Representative <b>Geidy Nolasco</b>				Date <b>5/7/19</b>	
Signature of Officer/Authorized Representative <i>Geidy Nolasco</i>					

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

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MAY 15 2019

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