



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

*Filing Period: June 1 - June 30*

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2019

**1. Corporate ID No.** 000038959

**2. Name of Corporation** Holy Ghost Brotherhood Mariense

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code   
813410

**4. Corporate Address in Rhode Island**

No. and Street: 193 SUMMIT ST  
City or Town: EAST PROVIDENCE State: RI Zip: 02914 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 193 SUMMIT ST  
City or Town: EAST PROVIDENCE State: RI Zip: 02914 Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TRADITIONAL HOLY GHOST FEAST OF SANTA MARIA CULTURAL ACTIVITIES

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ANTONIO NUNES	73 IPSWICH STREET SEEKONK, RI 02771 USA
TREASURER	JOSEPH A BRAGA	15 LAUREN DR SEEKONK, MA 02771 USA
SECRETARY	JOE A AMARAL	4 SCENIC ROAD JOHNSTON, RI 02919 USA
VICE PRESIDENT	STEPHANIE COSTA	162 BROWN STREET EAST PROVIDENCE, RI 02914 USA
RECEIVER	ZACHERY PEREIRA	10 RUTH AVENUE EAST PROVIDENCE, RI 02916 USA
DIRECTOR	ANTONIO M AMARAL	193 SUMMIT ST EAST PROVIDENCE, RI 02914 USA
DIRECTOR	DANIEL BAIROS	3 DESPIRTO LN BARRINGTON, RI 02806 USA
DIRECTOR	DAVID A BAIROS	28 SKYCREST AV EAST PROVIDENCE, RI 02914 USA
DIRECTOR	LUIS B BRAGA	47 WALLEY ST BRISTOL, RI 02809 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

DAVID BAIROS 846 BROADWAY EAST PROVIDENCE , RI 02914

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 21 Day of May, 2019 at 9:23:38 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.***

By ANTONIO AMARAL  
 Signature of Authorized Person

Form No. 631  
 Revised 09/07