



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

Annual Report for the year:
Non-Profit Corporation

2019

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

1. Entity ID Number 72030		2. Exact name of the Corporation Manantial de Vida Assembly of God Spring of Life			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Christian church for the purpose of congregational worship.			
4. NAICS Code 813110					
6. Principal Office Address 244 Elmwood Avenue			City Providence	State R.I	Zip 02907
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name None			Vice-President Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name Heydi A. Mercedes Zayas			Treasurer Name Luis Garcia		
Street Address 156 Graystone St.			Street Address 232 Elmwood Avenue		
City Warwick	State R.I	Zip 02886	City Providence	State R.I	Zip 02907
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Antonio Rivera			Director Name Francisco Brito		
Street Address 71 Wendell St.			Street Address 39 Salmon St. apt. 204		
City Providence	State R.I	Zip 02909	City Providence	State R.I	Zip 02909
Director Name Aida Agosto			Director Name		
Street Address 179 Camp St. 3rd Fl			Street Address 27 Verndale Ave. apt. 2		
City Providence	State R.I	Zip 02906	City Providence	State R.I	Zip 02905
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 841.					
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.					
<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 Heydi A. Mercedes Zayas					Date 5/24/19
Signature of Officer/Authorized Representative Heydi Mercedes					FILED

MAY 28 2019

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