



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

JUL 01 2019

BY

8001305867
DSAnnual 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.

1. Entity ID Number 119131		2. Exact name of the Corporation Iglesia Pentecostal Roca Eterna	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island To proclaim the gospel of Christ and beliefs of evangelical Christian faith, to maintain the worship of God, and to inspire all persons, a love for Christ, a passion for righteousness, and consciousness of their duties to God and fellow human beings.	
4. NAICS Code 813110 - Religious Organ			
6. Principal Office Address 400 Warwick Avenue Unit 12		City Warwick	State RI
		Zip 02888	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Maria Alcantara		Vice-President Name Encarnacion Avila	
Street Address 56 Cumerford Street		Street Address 44 Laban Street	
City Providence	State RI	City Providence	State RI
Zip 02907		Zip 02909	
Secretary Name Wanda Escobedo		Treasurer Name Maira Pena	
Street Address 208 Early Street		Street Address 107 Pomona Avenue	
City Providence	State RI	City Providence	State RI
Zip 02907		Zip 02908	
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 Maria Alcantara		Director Name Encarnacion Avila	
Street Address 56 Cumerford Street		Street Address 44 Laban Street	
City Providence	State RI	City Providence	State RI
Zip 02907		Zip 02907	
Director Name Maira Pena		Director Name	
Street Address 107 Pomona Avenue		Street Address	
City Providence	State RI	City	State
Zip 02908		Zip	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
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.			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>			
Name of Officer/Authorized Representative Wanda Escobedo			Date 6/28/19
Signature of Officer/Authorized Representative Wanda Escobedo			