



**State of Rhode Island
Office of the Secretary of State**

Fee: \$20.00

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

**Foreign Non-Profit
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: 2021

1. Corporate ID No. 000933121

2. Name of Corporation Iglesia Pentecostal Unida Latinoamericana Inc.

3. State of Incorporation

State: FL

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

6

813110

4. Corporate Address in Rhode Island

No. and Street: 105 DODGE STREET

City or Town: PROVIDENCE

State: RI

Zip: 02907

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

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

CHURCH

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	JENNER PUENTES	541 W 145TH ST NEW YORK , NY 10031 USA
TREASURER	NESTOR HUGO RIVERA	14040 Bammel N. Houston Rd Houston, TX 77014 USA
SECRETARY	JAMES A CORRALES	70 HUDSON ST DOVER, NJ 07801 USA
CHRISTIAN EDUCATION DIRECTOR	ADRIAN BURGOS	137 COLSTON LANE TWIN CITY, GA 30471 USA
VICE PRESIDENT	JOSUE MOSQUERA	420 WEST END AVE ELIZABETH, NJ 07202 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

JOSE MORALES DELCID 18 SUNFLOWER CIRCLE NORTH PROVIDENCE , RI 02911

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

Signed this 12 Day of January, 2021 at 12:18:06 AM 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 JAMES A. CORRALES
Signature of Authorized Person

Form No. 631
Revised 09/07