



State of Rhode Island

Department of State - Business Services Division

FILED

Annual Report for the year:

2020

APR 26 2021

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.

BY 8.444

|  |               |  |                             |
|--|---------------|--|-----------------------------|
| 1. Entity ID Number<br>000513309   |               | 2. Exact name of the Corporation<br>FUNDACION LOS MARTINEZ<br>ASESINADOS Y DESAPARECIDOS POR LA<br>TIBERIA TRUJILLO  |                             |
| 3. State of Incorporation<br>R.I.  |               | 5. Brief description of the character of business conducted in Rhode Island<br>TO: CONSTRUCT A MONUMENT TO RECOGNIZE<br>AND HONOR VICTIMS AND FAMILIES OF<br>1930 - 1961 |                             |
| 4. NAICS Code<br>453998  |               |  |                             |
| 6. Principal Office Address<br>159 Gallatin st   |               | City<br>PROV   | State<br>RI<br>Zip<br>02907 |
| 7. List ALL officers (names and addresses) <input type="checkbox"/> Check the box to indicate an attachment  |               |  |                             |
| President Name<br>Victor J. Martinez   |               | Vice-President Name<br>CYNTHIA MARTINEZ  |                             |
| Street Address<br>159 GALLATIN ST  |               | Street Address<br>159 GALLATIN ST  |                             |
| City<br>PROV.  | State<br>R.I. | City<br>PROV.  | State<br>R.I.               |
| Zip<br>02907   |               | Zip<br>02907   |                             |
| Secretary Name   |               | Treasurer Name<br>YUDEIKA MARTINEZ   |                             |
| Street Address   |               | Street Address<br>159 GALLATIN ST  |                             |
| City<br>PROV.  | State<br>R.I. | City<br>PROV.  | State<br>R.I.               |
| Zip<br>02907   |               | Zip<br>02907   |                             |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <input type="checkbox"/> Check the box to indicate an attachment                                    |               |  |                             |
| Director Name<br>Victor Martinez   |               | Director Name<br>CYNTHIA MARTINEZ  |                             |
| Street Address<br>159 GALLATIN ST  |               | Street Address<br>159 GALLATIN ST  |                             |
| City<br>PROV.  | State<br>R.I. | City<br>PROV.  | State<br>R.I.               |
| Zip<br>02907   |               | Zip<br>02907   |                             |
| Director Name<br>YUDEIKA MARTINEZ  |               | Director Name  |                             |
| Street Address<br>159 GALLATIN ST  |               | Street Address   |                             |
| City<br>PROV.  | State<br>R.I. | City   | State                       |
| Zip<br>02907   |               | Zip  |                             |
| 9. The Registered Agent information of record with the RI Department of State is accurate. 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. |               |  |                             |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee                                   |               |  |                             |
| Name of Officer/Authorized Representative<br>Victor Martinez   |               | Date<br>4/20/2021  |                             |
| Signature of Officer/Authorized Representative<br>Victor Martinez  |               |  |                             |

## MAIL TO:

Division of Business Services

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