



**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

**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:** 2021

**1. Corporate ID No.** 001097487

**2. Name of Corporation** CENTRO DE INNOVACION MUJER LATINA

**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

**4. Principal Office Address**

No. and Street: 279 DEXTER ST  
City or Town: PROVIDENCE State: RI Zip: 02907 Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

WORKING WITH LATIN WOMEN THE HOLISTICOLLY IN DEVELOPMENT OF LIFE

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

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DANIEL WEST	89 STANBURY STREET PROVIDENCE, RI 02908 USA
DIRECTOR	EULOGIA A COLOP	87 RALPH ST

		PROVIDENCE, RI 02909 USA
DIRECTOR	MANUEL DE PENA	89 STENBURY ST PROVIDENCE, RI 02908 USA
SECRETARY	ODETHE RIVERA	239 STERLING AVE PROVIDENCE, RI 02908 USA
VICE PRESIDENT	DARWIN CASTRO	161 HAROLD ST PROVIDENCE, RI 02909 USA
TREASURER	MANUEL MENDEZ	87 RALPH ST PROVIDENCE, RI 02907 USA
DIRECTOR	JULIO RODRIGUEZ	944 ATWELLS AVENUE PROVIDENCE, RI 02909 USA

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

EVYLEGNA RODRIGUEZ 2597 HARTFORD AVENUE JOHNSTON , RI 02919

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

*Signed this 2 Day of November, 2021 at 2:33:08 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 DANIEL WEST  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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