



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023

Non-Profit Corporation


→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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BUS SVCS DIV

2023 JAN 26 A 9:35

1. Entity ID Number 001732804		2. Exact name of the Corporation NOUVELLE JERUSALEM PRAYER LINE			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island PRAYER LINE			
4. NAICS Code 813110 - Religious Organization					
6. Principal Office Address 84 N BEND STREET, APT 3		City PAWTUCKET		State RI	Zip 02860
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name DERNIER CADET		Vice-President Name JORDAN RORO FEVRY			
Street Address N BEND STREET, APT 3		Street Address N BEND STREET, APT 3			
City PAWTUCKET	State RI	Zip 02860	City PAWTUCKET	State RI	Zip 02860
Secretary Name JEREMIAH JB CADET		Treasurer Name			
Street Address N BEND STREET, APT 3		Street Address			
City PAWTUCKET	State RI	Zip 02860	City	State	Zip
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 DERNIER CADET		Director Name JORDAN RORO FEVRY			
Street Address N BEND STREET, APT 3		Street Address N BEND STREET, APT 3			
City PAWTUCKET	State RI	Zip 02860	City PAWTUCKET	State RI	Zip 02860
Director Name JEREMIAH JB CADET		Director Name			
Street Address N BEND STREET, APT 3		Street Address			
City PAWTUCKET	State RI	Zip 02860	City	State	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.					
<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 DERNIER CADET				Date 01/25/2023	
Signature of Officer/Authorized Representative 					

FILED 435

JAN 26 2023
BY 76281

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov