



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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BUSINESS SERVICES DIVISION

2023 MAR 29 A 11:09

1. Entity ID Number 94874		2. Exact name of the Corporation MEXICAN SOCCER LEAGUE			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island			
4. NAICS Code 713990		FOR THE SOCCER			
6. Principal Office Address 161 FAIRVIEW ST		City PROVIDENCE	State RI	Zip 02908	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name LORENZO NUNEZ			Vice-President Name RAYMUNDO NUNEZ		
Street Address 161 FAIRVIEW ST			Street Address 161 FAIRVIEW ST		
City PROVIDENCE	State RI	Zip 02908	City PROVIDENCE	State RI	Zip 02908
Secretary Name MARIA E NUNEZ			Treasurer Name JUAN NUNEZ		
Street Address 161 FAIRVIEW ST			Street Address 161 FAIRVIEW ST		
City PROVIDENCE	State RI	Zip 02908	City PROVIDENCE	State RI	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 LORENZO NUNEZ			Director Name RAYMUNDO NUNEZ		
Street Address 161 FAIRVIEW ST			Street Address 161 FAIRVIEW ST		
City PROVIDENCE	State RI	Zip 02908	City PROVIDENCE	State RI	Zip 02908
Director Name MARIA E NUNEZ			Director Name JUAN NUNEZ		
Street Address 161 FAIRVIEW ST			Street Address 161 FAIRVIEW ST		
City PROVIDENCE	State RI	Zip 02908	City PROVIDENCE	State RI	Zip 02908
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 LORENZO NUNEZ				Date 3/29/23	
Signature of Officer/Authorized Representative <i>Lorenzo Nunez</i>				FILED MAR 29 2023 BY <i>NAL MZ DRY</i>	

MAIL TO:

Division of Business Services

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