

**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: February 1 - May 1

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 - ENTER THE CURRENT FILING YEAR 2023: 2023**1. Corporate ID No.** 001747691**2. Name of Corporation** Hope & Main Providence**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

624210**4. Principal Office Address**No. and Street: 945 WESTMINSTER STCity or Town: PROVIDENCEState: RIZip: 02903-4021Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

TO PROVIDE SHARED USE KITCHENS, TECHNICAL AND BUSINESS ASSISTANCE,
ACCESS TO
MARKETS AND CONNECTIONS TO CAPITAL TO ASSIST ENTREPRENEURS FROM
ALL MEANS AND
BACKGROUNDS

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
DIRECTOR	LISA RAIOLA	39 HIGH STREET BRISTOL, RI 02809 USA
DIRECTOR	SANJIV DHAR	133 KETTLE POINT AVENUE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	JUAN K WILSON JR	11 S. ANGELL ST SUITE 223 PROVIDENCE, RI 02906 USA
DIRECTOR	SCOTT BROMBERG	71 GROTTO AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	LUCA CARNEVALE	81 FIELDSTONE DR COVENTRY, RI 02816 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

LISA RAIOLA 945 WESTMINSTER STREET PROVIDENCE , RI 02903

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

Signed this 8 Day of May, 2023 at 5:09:46 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 MARILYN R MATHISON
Signature of Authorized Person

Form No. 631
Revised 09/07

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