



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2020  
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.

**STAMP**

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1. Entity ID Number <b>000164205</b>		2. Exact name of the Corporation <b>Amigos de Rabo de Peixe, Inc.</b>	
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Promote the Portuguese culture and traditions of the current and former residents of the Town of Rabo de Peixe and their ancestors, located in Azores, Portugal.</b>	
4. NAICS Code <b>813214</b>			
6. Principal Office Address <b>194 Warren Ave.</b>		City <b>East Providence</b>	State <b>RI</b>
		Zip <b>02914</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>Nicolau Flor</b>		Vice-President Name <b>Agostinho Terceira</b>	
Street Address <b>85 Vine St.</b>		Street Address <b>1081 Taunton Ave.</b>	
City <b>East Providence</b>	State <b>RI</b>	City <b>Seekonk</b>	State <b>MA</b>
Zip <b>02905</b>		Zip <b>02771</b>	
Secretary Name <b>Teresa Santos</b>		Treasurer Name <b>Elvira Raposo</b>	
Street Address <b>807 High St</b>		Street Address <b>220 Bedford St., G7</b>	
City <b>Fall River</b>	State <b>MA</b>	City <b>Bridgewater</b>	State <b>MA</b>
Zip <b>02720</b>		Zip <b>02324</b>	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>Mario J. Barbosa</b>		Director Name <b>Teresa Santos</b>	
Street Address <b>1706 Robeson St</b>		Street Address <b>807 High St</b>	
City <b>Fall River</b>	State <b>MA</b>	City <b>Fall River</b>	State <b>MA</b>
Zip <b>02720</b>		Zip <b>02720</b>	
Director Name <b>Elvira Raposo</b>		Director Name	
Street Address <b>220 Bedford St., G-7</b>		Street Address	
City <b>Bridgewater</b>	State <b>MA</b>	City	State
Zip <b>02324</b>		Zip	
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.			
<b>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.</b>			
<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 <b>Elvira Raposo</b>			Date <b>5/8/23</b>
Signature of Officer/Authorized Representative <b>ERaposo</b>			

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

MAY 08 2023  
BY 96566