	State of Rhode	lsland	Fee: \$20.00	
	Office of the Secret			
	Division Of Busines	s Services		
	148 W. River S			
1636	Providence RI 029 (401) 222-30			
	(401) 222-30			
Non-Profit Corporation Annual Report				
Filing Period: February 1 - May	1			
In accordance with R.I.G.L. 7-6 annual report within the time pr penalty fee of \$25.00.	· · · · · · · · · · · · · · · · · · ·			
ANNUAL REPORT YEAR - EN	TER THE <u>CURRENT</u> FILING	YEAR <b>2023</b> : <u>2023</u>		
1. Corporate ID No. 00013	32185			
2. Name of Corporation <u>ABU</u> <u>CHURCH</u>	JNDANT LIFE VIDA AB	UNDANTE UNITED	METHODIST	
3. State of Incorporation				
State: <u>RI</u>				
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 <u>click here.</u>				
NAICS Code				
<u>813110</u>				
4. Principal Office Address				
No. and Street: 689 CR A				
City or Town: <u>PROVID</u>	<u>NSTON STREET</u> FNCE St	ate: <u>RI</u> Zip: <u>02907</u>	Country: <u>USA</u>	
			<u> </u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
<u>CHURCH</u>				
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	Addr	ess	
l *	-		'	

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	SANTOS N ESCOBAR	685 CRANSTON STREET, 2ND FLOOR PROVIDENCE, RI 02907 USA	
SECRETARY	DELMY M RECINOS	222 WADSWORTH ST PROVIDENCE, RI 02909 USA	
DIRECTOR	MERICI RECINOS	222 WADSWORTH ST. APT. A PROVIDENCE, RI 02909 USA	
TREASURER	MARVIN DEL CID	127 WEBSTER ST PAWTUCKET, RI 02861 USA	
VICE PRESIDENT	JOEL CORREA	356 HAWKINS ST PROVIDENCE, RI 02904 USA	
DIRECTOR	ROCIO BERMUDEZ	1260 CRANSTON ST CRANSTON, RI 02920 USA	
DIRECTOR	LILIAN ESCOBAR	30 SUNRISE DRIVE PROVIDENCE, RI 02908 USA	
DIRECTOR	EVELYN CONTRERAS	126 CLEVELAND PROVIDENCE , RI 02909 USA	
DIRECTOR	GUILLERMO DUBON	102 ROANOKE ST PROVIDENCE, RI 02908 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

REV. SANTOS ESCOBAR 689 CRANSTON STREET PROVIDENCE , RI 02907

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

**Signed this 19 Day of May, 2023 at 1:26:43 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 LILIAN ESCOBAR

Signature of Authorized Person

Form No. 631 Revised 09/07

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