	State of Rhode Office of the Secre		Fee: \$20.00	
Division Of Business Services				
	148 W. River	Street		
	Providence RI 02			
1636	(401) 222-3	040		
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 pre penalty fee of \$25.00.				
ANNUAL REPORT YEAR - ENT	ER THE <u>CURRENT</u> FILING	YEAR 2023 : <u>202</u>	23	
1. Corporate ID No. 000504997				
2. Name of Corporation Iglesia Pentecostal Mi Redentor Vive				
3. State of Incorporation				
State: <u>RI</u>				
NAICS CODE				
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: 198 ARNOLD STREET				
	OLD STREET	to, DI 7:	5 Country USA	
City or Town: <u>WOONSC</u>	<u>JCKEI</u> Sta	te: <u>RI</u> Zip: <u>0289</u>	95 Country: <u>USA</u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
A CHRISTIAN CHURCH FOR CONGREGATION WORSHIP				
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 own, State, Zip Code, Country	

TREASURER	JESSICA S RODRIGUEZ	186 VEAZIE ST PROVIDENCE, RI 02908 USA
PRESIDENT	REV. CYNTHIA L. FERNANDEZ	292 NINTH AVE. WOONSOCKET, RI 02895 USA
OTHER OFFICER	CYNTHIA FERNANDEZ	292 9 TH AVE WOONSOCKET, RI 02895
DIRECTOR	RAQUEL LOPEZ	675 ELMWOOD AVENUE PROVIDENCE, RI 02905 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

CYNTHIA L. FERNANDEZ 292 NINTH AVENUE WOONSOCKET, RI 02895

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

Signed this 16 Day of June, 2023 at 3:25:22 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 CYNTHIA L. FERNANDEZ

Signature of Authorized Person

Form No. 631 Revised 09/07

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