



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.

Amended

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RI DEPARTMENT OF STATE

2023 JUN 21 A 11:30

1. Entity ID Number <b>56554</b>		2. Exact name of the Corporation <b>Iglesia de Dios Pentecostal Aposento Alto</b>	
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Religious organization worship center - congregation</b>	
4. NAICS Code <b>813990</b>			
6. Principal Office Address <b>628 Public Street</b>		City <b>Providence</b>	State <b>RI</b>
		Zip <b>02907</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>Cesar Mercado</b>		Vice-President Name	
Street Address <b>22 Philmont Ave</b>		Street Address	
City <b>Cranston</b>	State <b>RI</b>	City	State
Zip <b>02910</b>		Zip	
Secretary Name <b>Michelle Sanchez</b>		Treasurer Name <b>Leonor Guñones</b>	
Street Address <b>90 James Street</b>		Street Address <b>11 Kinne Street</b>	
City <b>E. Providence</b>	State <b>RI</b>	City <b>W. Warwick</b>	State <b>RI</b>
Zip <b>02914</b>		Zip <b>02893</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>Gabriel Mosquea</b>		Director Name <b>Miriam Gonzalez</b>	
Street Address <b>154 Chapel Street</b>		Street Address <b>1414 Broad Street</b>	
City <b>Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
Zip <b>02909</b>		Zip <b>02905</b>	
Director Name <b>Joaquin Alburquerque</b>		Director Name <b>Gloria I. Muñoz</b>	
Street Address <b>120 Dora Street</b>		Street Address <b>17 Salisbury Street</b>	
City <b>Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
Zip <b>02909</b>		Zip <b>02905</b>	
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>Jesús Soto</b>			Date <b>6/21/23</b>
Signature of Officer/Authorized Representative 			

FILED

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

JUN 21 2023  
BY ML



State of Rhode Island  
**Department of State | Office of the Secretary of State**  
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,  
hereby certify that this document, duly executed in accordance with the provisions  
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this  
office on this day:

June 21, 2023 11:30 AM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

