



**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.** 001710192

**2. Name of Corporation** Marie Love Foundation

**3. State of Incorporation**

State: RI

**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 [click here](#).

NAICS Code  
813211

**4. Principal Office Address**

No. and Street: 14 DUKE STREET

City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

TO PROVIDE SUPPORT TO WOMEN OF HAITIAN, AFRICAN, AND AMERICAN  
DECENT WITH A EMPHASIS ON EDUCATION AND CULTURAL ART.

**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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	SIMBA NKOSI	14 DUKE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	LAUREN M THOMPSON	41 HAROLD STREET ROXBURY, MA 02119 USA
DIRECTOR	TRICIA SAINTIL	43 MARJORIE RD STOUGHTON , MA 02072 USA
DIRECTOR	YURI SAINTIL	398 COLUMBUS AVE BOSTON, MA 02116 USA
DIRECTOR	AMY PAGLIARINI	928 PRESIDENT STREET APT C2 BROOKLYN, NY 11215 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**

SIMBA NKOSI 14 DUKE STREET PROVIDENCE , RI 02908

**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 August, 2023 at 10:25:00 AM 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 YURI SAINTIL  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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