



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.

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R.I. DEPT. OF STATE
BUS SVCS DIV.

2023 OCT -3 P 1:55

1. Entity ID Number 001744055		2. Exact name of the Corporation Casa de Oracion Rhode Island Para las Naciones			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island NON-PROFIT CHURCH			
4. NAICS Code 813110					
6. Principal Office Address 744 Park av.			City Cranston	State R.I.	Zip 02910
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Juan Carlos Ardaya			Vice-President Name Hortencia K. Ascarrunz de Ardaya		
Street Address 882 Admiral St. 1 Fl			Street Address 882 Admiral St. 1 Fl		
City Providence	State R.I.	Zip 02904	City Providence	State R.I.	Zip 02904
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Jorge A. Ardaya			Director Name Juan Carlos Ardaya		
Street Address 882 Admiral St 1 Fl			Street Address 882 Admiral St. 1 Fl		
City Providence	State R.I.	Zip 02904	City Providence	State R.I.	Zip 02904
Director Name Hortencia K. Ascarrunz de Ardaya			Director Name		
Street Address 882 Admiral St 1 Fl			Street Address		
City Providence	State R.I.	Zip 02904	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
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.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee					
Name of Officer/Authorized Representative Juan Carlos Ardaya					Date 09/28/2023
Signature of Officer/Authorized Representative 					FILED 158

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

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BY 1MSFH