RI SOS Filing Number: 202342421220 Date: 10/25/2023 2:27:00 PM



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 YEAR **2024**: 2024

- 1. Corporate ID No. <u>001763891</u>
- 2. Name of Corporation **Grupo Misol-Ha**
- 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 <u>click here.</u>

NAICS Code

711510

4. Principal Office Address

No. and Street: 1413 CHALKSTONE AVE

City or Town: PROVIDENCE State: RI Zip: 02909 Country: US

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

TO PRACTICE AND PERFORM MEXICAN FOLKLORIC DANCE TO KEEP THIS TRADITION ALIVE.

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

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
INCORPORATOR	JOSE SALGADOI	1413 CHALKSTONE AVE PROVIDENCE, RI 02909 US
DIRECTOR	JOSE SALGADO	1413 CHALKSTONE AVE PROVIDENCE, RI 02904 US
DIRECTOR	GUADALUPE M CHAVEZ	242 NORTHUP ST CRANSTON, RI 02905 US
DIRECTOR	BERENICE BETANCUR	36 SHEPARD AVE PROVIDENCE, RI 02904 US

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

RODRIGO BETANCUR 1413 CHALKSTONE AVE PROVIDENCE, RI 02909

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

Signed this 25 Day of October, 2023 at 2:30:41 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 RODRIGO BETANCUR

Signature of Authorized Person

Form No. 631 Revised 09/07

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