

REC'D RIDOS BSD
24 FEB 16 PM 1:42:15



**State of Rhode Island
Department of State - Business Services Division**

Annual Report for the year: 2024
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.

1. Entity ID Number <u>001705735</u>		2. Exact name of the Corporation <u>JESUS KING INTERNATIONAL Ministries</u>			
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>TO REACH A WIDE MAJORITY OF PEOPLE WITH THE UPLIFTING NON JUDGEMENTAL AND LIFE CHANGING LOVE OF GOD THROUGH THE MESSAGE FROM THE WORD OF GOD.</u>			
4. NAICS Code <u>813990</u>					
6. Principal Office Address <u>151 Atlantic Avenue</u>		City <u>Providence</u>		State <u>RI</u>	Zip <u>02907</u>
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name <u>Wendy I Vasquez</u>			Vice-President Name <u>Salvador Antonio Vasquez Brito</u>		
Street Address <u>151 Atlantic Ave</u>			Street Address <u>151 Atlantic Ave</u>		
City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>	City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>
Secretary Name <u>Sachateo Reyes</u>			Treasurer Name		
Street Address <u>151 Atlantic Ave</u>			Street Address		
City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>	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 <u>Katherine Tejada</u>			Director Name <u>Wentzel Vasquez</u>		
Street Address <u>151 Atlantic Ave</u>			Street Address <u>151 Atlantic Ave</u>		
City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>	City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>
Director Name <u>Menarcis Vasquez</u>			Director Name		
Street Address <u>151 Atlantic Ave</u>			Street Address		
City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>	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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <u>Sachateo Reyes</u>					Date <u>2/16/2024</u>
Signature of Officer/Authorized Representative <u>Sachateo Reyes</u>					FILED 1.45

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

FEB 16 2024
BY T2BJX PS