



**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. 001714223

2. Name of Corporation Movimiento de Fe Civico MOFECI

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

813990

4. Principal Office Address

No. and Street: 19 STONE STREET, UNIT 6

UNIT 6

City or Town: PROVIDENCE

State: RI Zip: 02904 Country: USA

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

MOFECI IS A NONPARTISAN ORGANIZATION WHOSE MISSION IS TO: - EMPOWER THE COMMUNITY WITH REGARDS TO THE ELECTORAL PROCESS, AND PLATFORMS PRESENTED BY CANDIDATES WHILE CAMPAIGNING. -VOICE FOR THE IDEALS OF THE LATINO COMMUNITY THAT IS UNDERREPRESENTED, RELATED TO ISSUES THAT ARE AFFECTING THEIR QUALITY OF LIFE; THEREFORE, CREATING SOCIAL INEQUALITIES AND CHALLENGES IN PRESERVING LONG STANDING FAMILY VALUES THAT IS IN-FACT, THE FABRIC AND BED-ROCK OF OUR NATION

AND STATE. WE ARE COMMITTED TO EDUCATING BOTH, ELECTED OFFICIALS AND CANDIDATES ON THESE IDEALS, WHILE BUILDING A BROAD COALITION OF SUPPORT AMONG OUR COMMUNITIES.

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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	OLINDA L URIZAR	19 STONE STREET, UNIT 6 PROVIDENCE, RI 02904 USA
TREASURER	JULIO R PAZ	5 SEVILLE STREET JOHNSTON, RI 02919 USA
VICE PRESIDENT	ROGELIO A SUCHITE JR.	66 ANGELL AVE. N PROVIDENCE, RI 02911 USA
DIRECTOR	OLINDA L URIZAR	19 STONE STREET, UNIT 6 PROVIDENCE, RI 02904 USA
DIRECTOR	JULIO R PAZ	5 SEVILLE STREET JOHNSTON, RI 02919 USA
DIRECTOR	ROGER A SUCHITE JR.	66 ANGELL AVE N PROVIDENCE, RI 02911 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

ROGELIO A. SUCHITE, JR. 19 STONE STREET, UNIT 6 PROVIDENCE , RI 02904

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

Signed this 20 Day of March, 2024 at 12:30:44 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 OLINDA L URIZAR
Signature of Authorized Person

Form No. 631
Revised 09/07