	State of Rhode Office of the Secreta		Fee: \$20.00		
	Division Of Busines				
	148 W. River S				
1636	Providence RI 029 (401) 222-30				
Non-Profit Corporation	(101) 222 30				
Annual Report					
Filing Period: February 1 - May	1				
In accordance with R.I.G.L. 7-6 annual report within the time pr	· · · · · · · · · · · · · · · · · · ·				
penalty fee of \$25.00.					
ANNUAL REPORT YEAR - EN	TER THE CURRENT YEAR 2	024 : <u>2024</u>			
1. Corporate ID No. <u>00176</u>	<u>52515</u>				
2. Name of Corporation La Luz del Mundo Church of Providence					
3. State of Incorporation					
State: <u>RI</u>					
	NAICS CODE				
Using the dropdown labeled N primary type of activity in whic populate a NAICS Code based box on the right. For further as	ch your entity engages. The d on the chosen selection. If	box to the right of the the NAICS Code is k	e dropdown will		
NAICS Code					
<u>813110</u>					
4. Principal Office Address					
	BROKE AVE	DI 7:n. 02008	Country: USA		
City or Town: <u>PROVII</u>	DENCE State:	<u>RI</u> Zip: <u>02908</u>	Country: <u>USA</u>		
5. Brief Description of the Ch	aracter of the Affairs Condu	ucted in Rhode Islan	d		
RELIGIOUS ORGANIZAT	ION (CHURCH)				
6. Names and Addresses of t	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		dress		
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country		
1					

INCORPORATOR	ROSA TOSCANO	25 PEMBROKE AVE PROVIDENCE, RI 02908 US
DIRECTOR	JORGE BERNAL	25 PEMBROKE PROVIDENCE, RI 02908 US
DIRECTOR	ROSA MARTINEZ	25 PEMBROKE AVE PROVIDENCE , RI 02908 US
DIRECTOR	ROSA TOSCANO	25 PEMBROKE AVE PROVIDENCE , RI 02908 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

ROSA TOSCANO 25 PEMBROKE AVE 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 29 Day of March, 2024 at 9:23:24 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 <u>ROSA TOSCANO</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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