RI SOS Filing Number: 202457025960 Date: 6/20/2024 1:09:00 PM



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

2024 JUN 20 PM 1: 08

form is not filed by	May 31.			
2 Exact name of the Corporation Iglesia Evangélica Hispana UCC/Hispanic Evangelical Church U				
Brief description of the character of business conducted in Rhode Island				
Religious and Mission Services				
		City	State	Zip
		LINCOLN	RI	02865
7. List ALL officers (names and addresses) Check the box to indicate an attachment				
President Name SONIA SANCHEZ		Vice-President Name NONE		
Street Address 185 CHAPEL ST		Street Address NONE		
State RI	^{Z_{ip}} 02865	City NONE	State NONE	Zip NONE
Secretary Name ADAMARIS VILLAR		Treasurer Name RACHELLE ESPINOZA		
Street Address 185 CHAPEL ST		Street Address 185 CHAPEL ST		
State RI	^{Zip} 02865	City LINCOLN	State RI	^{Zip} 02865
8. List ALL directors (names and addresses). RI Corporations MUS T list at least THREE directors. Check the box to indicate an attachment				
Director Name MELIDA M CAMARENA		Director Name RUAMA RODRIGUEZ		
Street Address 185 CHAPEL ST		Street Address 185 CHAPEL ST		
State RI	^{Zip} 02865	City LINCOLN	State RI	Zip UZOUU
Director Name DOLORES REYNOSO		Director Name SONIA VASQUEZ		
Street Address 185 CHAPEL ST		Street Address 185 CHAPEL ST		
State RI	^{Zip} 02865	City LINCOLN	State RI	^{Zip} 02865
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 ADAMARIS VILLAR			Date	
Hellen FILED				
	2 Exact name of Iglesia Evaluation State RI State RI State RI Idresses). RI Corporation REIGIONS IARENA IT State RI Idresses). RI Corporation RI In of record with the state and affirm that its contained her ident. Vice-President. State RI Idresses.	Iglesia Evangélica His 5. Brief description of the characte Religious and Mission Se resses) IEZ T State RI State RI Zip 02865 Idresses). RI Corporations MUST I MARENA IT State RI Zip 02865 Idresses). RI Corporations MUST I MARENA IT State RI Zip 02865 MOSO T State RI Zip 02865 To of record with the RI Department re and affirm that I have examine not contained herein are true and ident, Vice-President, Secretary, Assistant State entative	2 Exact name of the Corporation Iglesia Evangélica Hispana UCC/Hispanic Ev 5. Brief description of the character of business conducted in Rhode Isl Religious and Mission Services City LINCOLN resses) Check the Vice-President Name NONE Street Address NONE City NONE Treasurer Name RACHELLE E Street Address 185 CHAPEL S State RI Zip 02865 City LINCOLN dresses). RI Corporations MUST list at least THREE directors. Check the Director Name RUAMA RODR Street Address 185 CHAPEL S City LINCOLN Check the Director Name RUAMA RODR The Street Address 185 CHAPEL S City LINCOLN Check the Director Name RUAMA RODR City LINCOLN Check the City Character Name RUAMA RODR City LINCOLN Check the Check t	2 Exact name of the Corporation Iglesia Evangélica Hispana UCC/Hispanic Evangelical Ch 5. Brief description of the character of business conducted in Rhode Island Religious and Mission Services City

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

FORM 631- Revised. 12/2023

Entity ID Number: 001746065

8. List ALL directors (names and addresses) continued:

FLOR GARO 185 CHAPEL ST LINCOLN RI 02865

MAXIMA FIGUEREO 185 CHAPEL ST LINCOLN RI 02865

JANETH ESPINOZA 185 CHAPEL ST LINCOLN RI 02865