



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year 2025  
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.

JAN 10 2025

00321

1. Entity ID Number 1676711		2. Exact name of the Corporation Angel in Action			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island To help families in need			
4. NAICS Code 813311					
6. Principal Office Address 1542 Main St Ste 6		City West Warwick		State RI	Zip 02893
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Debra J Roffo			Vice-President Name		
Street Address 25 Hollow Circle			Street Address		
City West Warwick	State RI	Zip 02893	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Debra J Roffo			Director Name Erica Callahan		
Street Address 25 Hollow Circle			Street Address 330 Henry Brown Rd		
City West Warwick	State RI	Zip 02893	City West Greenwich	State RI	Zip 02893
Director Name Shannon Oliver			Director Name		
Street Address 169 Boston St			Street Address		
City Coventry	State RI	Zip 02916	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.					
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 Debra A Roffo				Date 2/29/2024	
Signature of Officer/Authorized Representative 					

## RI WOMEN'S EXPO EXHIBITOR AGREEMENT

December 1, 2024, Crowne Plaza Hotel, Warwick, RI, 11am-4pm

WEB: riwomensexpo.com

Contact: Pat Cruz Events 401-261-3300 or Email: patpaolinoeruz@gmail.com



### Exhibit Options:

- ☒ Single 8' Wide x 8' Deep, 1- 6' Table, Linen, 2 Chairs \$300
- \_\_\_\_\_ Double 14' Wide x 8' Deep, 2- 6' Tables, Linen, 2 Chairs \$500
- \_\_\_\_\_ Corner Space Add \$100 to Single or Double Space Fee
- \_\_\_\_\_ Discountharity/Non-Profit \$100 Discount Towards Exhibit Fee
- \_\_\_\_\_ Food/Drink Tasting Providing at least 300 Samples \$100 Discount

### Sponsorship 4 Categories: Please Check Interest. Sponsorship Form Will Be Sent for Review by Request

- \_\_\_\_\_ Presenting Sponsor \$7,500
- \_\_\_\_\_ Silver Sponsor \$2,500
- \_\_\_\_\_ Gold Sponsor \$5,000
- \_\_\_\_\_ Business Sponsor \$1,000

### Other Available Opportunities:

- \_\_\_\_\_ Would You Like Program Business Showcase Advertisement \$75 Half Page - \$100 Full Page
- \_\_\_\_\_ Swag BAG Sponsor (Provide 200 Shopping Size Bags to be Distributed to First 200 Attendees)
- \_\_\_\_\_ Swag Participant (Provide Sample Products/Marketing Materials for 200 Swag Bags Due Nov 20th)
- \_\_\_\_\_ Provide Grand Prize Giveaway Winner Announced at Sho - Value Over \$500 Will Promote on Web
- \_\_\_\_\_ Do You Need Electricity or Internet (Additional Charge. Form on Website & Paid to Hotel Directly)

- There are no exclusive categories except Presenting Sponsor however, all categories are limited.
- Only one business allowed per exhibit. All Exhibits Secured on a First Come First Serve Basis
- Additional info, marketing and display tips, tax form instruction and set up instruction sent once accepted.
- All Exhibitors must be Present and Exhibit Space Completely Set up from 10:30 am to 4pm
- If your Business is Not Located in Warwick and you are Selling Product at the event, you will need a day Permit from Warwick Police Department at Cost of \$25. Form Available on Website. Due to WPD 30 Days Prior to Event

Business Name: Eden LLC Business Phone 401.280.6613

Contact Name and Telephone Number: Stephanie Hawkins - 401.280.6613

Business Address: 2154 BROAD STREET CRANSTON RI

Business Email and Website edenbotanicalarts@gmail.com edenbotanicalarts.com

Type of Business: FLORIST Describe what you will be Showcasing at your Exhibit (Will you be offering info about services, selling product, offering comp services such as massage, food/drink tastings, health checks,

Etc. offering info about wedding/florist services + selling dried floral items as well

Do you have a Tax Id Number with the State - Please Provide Number: 88 - 3682397

Payment Information: Total Amount Due: 300.00 (NO Refunds/Transfers for any/all Event Fees)

**THIS FORM SHOULD BE COMPLETED AND PDF COPY SCANNED TO PATPAOLINOCRUZ@GMAIL.COM**

\_\_\_\_\_ Venmo (@Pat-Cruz) Due Same Day as Agreement

\_\_\_\_\_ Check Due Within in 5 Days Payable to PPC Events LCC, 83 Batcheller Ave, Cranston, RI 02920

☒ Credit Card Information Listed Here: Card Number: 5121 7422 3071 2093

Exp Date 05/28 Security Code 435 Billing Zip Code 02886 Signature [Signature]

As a representative for the above mentioned business, I agree to the terms and conditions set forth here.

Signature [Signature] Date 11/27/24