



State of Rhode Island
Department of State - Business Services Division

FILED

STAMP
 APR 24 2025

BY 15029

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.

1. Entity ID Number 140431		2. Exact name of the Corporation TEMPLO BIBLICO PROVIDENCE, INC			
3. State of Incorporation RHODE ISLAND		5. Brief description of the character of business conducted in Rhode Island TO PREACH THE WORD OF GOD			
4. NAICS Code 813110 - Religious Organization <input type="checkbox"/>					
6. Principal Office Address 7 LEGION WAY		City CRANSTON	State RI	Zip 02910	
7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>					
President Name ELVIS M. SENA			Vice-President Name MANUEL ZABALA		
Street Address 861 RESERVOIR AVENUE			Street Address 40 KINFIELD STREET		
City CRANSTON	State RI	Zip 02910	City PROVIDENCE	State RI	Zip 02909
Secretary Name ROSSY CABRERA			Treasurer Name ANGEL VALLECILLO		
Street Address 99 AMERICA STREET			Street Address 9 ROSEWOOD STREET		
City PROVIDENCE	State RI	Zip 02903	City PAWTUCKET	State RI	Zip 02860
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 ELVIS M. SENA			Director Name MANUEL ZABALA		
Street Address 861 RESERVOIR AVENUE			Street Address 40 KINFIELD STREET		
City CRANSTON	State RI	Zip 02910	City PROVIDENCE	State RI	Zip 02909
Director Name ROSSY CABRERA			Director Name ANGEL VALLECILLO		
Street Address 99 AMERICA STREET			Street Address 9 ROSEWOOD STREET		
City PROVIDENCE	State RI	Zip 02903	City PAWTUCKET	State RI	Zip 02860
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 ELVIS M. SENA				Date 02/28/2025	
Signature of Officer/Authorized Representative 					