



**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 2025: 2025

1. Corporate ID No. 001657139

2. Name of Corporation PROVIDENCE MABUHAY MISSION (PMMI)

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

813212

4. Principal Office Address

No. and Street: 5022 SHIRLEY DR.

12816 DESERT SKY AVE NE

City or Town: LA PALMA

State: CA Zip: 90623 Country: USA

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

TO HELP IN THE PROMOTION AND PROVISION OF ASSISTANCE IN THE HEALTH NEEDS OF THE UNDERSERVED

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
VICE PRESIDENT	MARIA T SOLIS	5022 SHIRLEY DR LA PALMA, CA 90623 US
VICE PRESIDENT	MARIA T SOLIS	5022 SHIRLEY DR LA PALMA, CA 90623 USA
SECRETARY/TREASURER	MARIA ELENA JIMENEZ SUAREZ	93 CHURCH AVE WARWICK, RI 02889 USA
DIRECTOR	VICENTE DE LIMA JR.	45 POLABAY SOUTHBAY GARDENS PARANAQUE, PHL
DIRECTOR	REMEDY MEDINA	4292 HELLMAN AVE LOS ANGELES, CA 90042 US
DIRECTOR	ABEL G SANTA ISABEL	909 N. FREDERICK ST. BURBANK, CA 91505 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

SUSAN DA SILVA 17 CLARK ROAD SMITHFIELD , RI 02917

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

Signed this 5 Day of June, 2025 at 5:23:33 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 MARIA ELENA JIMENEZ SUAREZ
Signature of Authorized Person

Form No. 631
Revised 09/07

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