



**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:** 2023

**1. Corporate ID No.** 001481147

**2. Name of Corporation** IGREJA DE NOSSA SENHORA DE MONTE

**3. State of Incorporation**

State: RI

**ARTICLE III**

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  
1481147

**4. Principal Office Address**

No. and Street: 81 ORLANDO DRIVE  
City or Town: NORTH PROVIDENCE State: RI Zip: 02904 Country: USA

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

TO RAISE FUNDS FOR RENOVATIONS AND MAINTENANCE OF THE LOCAL CHURCH IN BRAVA

**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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
DIRECTOR	ROSA DEBRITO	80 ANTHONY AVE PAWTUCKET, RI 02860 USA
DIRECTOR	JOSE DEBARROS	61 WARREN AVE PAWTUCKET, RI 02860 USA
DIRECTOR	JOAQUIM DEBRITO	80 ANTHONY AVE PAWTUCKET, RI 02860 USA
DIRECTOR	BARTOLOMEU D SOARES	81 ORLANDO DR N PROVIDENCE, RI 02904 USA
DIRECTOR	ECILDA B SOARES	81 ORLANDO DR N PROVIDENCE, RI 02904 USA

**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**

BARTOMEU SOARES 81 ORLANDO DRIVE NORTH PROVIDENCE , RI 02904

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

**Signed this 22 Day of February, 2023 at 11:28:43 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 BARTOLOMEU SOARES  
Signature of Authorized Person

Form No. 631  
Revised 09/07