



State of Rhode Island  
**Department of State - Business Services Division**

**FILED**

Annual Report for the year: 2023  
 Non-Profit Corporation

APR 27 2023  
 BY 6331

RECEIVED  
 DEPT. OF STATE  
 2023 MAR 31 12:03

- 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 <b>00029639</b>		2. Exact name of the Corporation <b>CLUBE SOCIAL PORTUGUES, INC</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>A social organization for the advancement of the Portuguese heritage, language, culture and customs</b>			
4. NAICS Code <b>813319 - Other Social Advoc</b>					
6. Principal Office Address <b>174 Portuguese Social Club Way</b>		City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Rui Azevedo</b>			Vice-President Name <b>Nelson Monteiro</b>		
Street Address <b>11 Sausbury St</b>			Street Address <b>95 Park Place #201</b>		
City <b>Providence</b>	State <b>MA</b>	Zip <b>02769</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
Secretary Name <b>Miguel de Almeida</b>			Treasurer Name <b>Jose Borges</b>		
Street Address <b>128 Wainscott Ave</b>			Street Address <b>205 Sherman Ave</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>Seekonk</b>	State <b>MA</b>	Zip <b>02771</b>
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 <b>Rui Azevedo</b>			Director Name <b>Antonio F. Gomes</b>		
Street Address <b>11 SAUSBURY ST</b>			Street Address <b>127 ZOAR AVE</b>		
City <b>Providence</b>	State <b>MA</b>	Zip <b>02719</b>	City <b>ATTLEBORO</b>	State <b>MA</b>	Zip <b>02703</b>
Director Name <b>Nelson Monteiro</b>			Director Name		
Street Address <b>95 PARK PL #201</b>			Street Address		
City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02860</b>	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>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.</b>					
<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 <b>Miguel De Almeida</b>				Date <b>02/02/23</b>	
Signature of Officer/Authorized Representative 					

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov