

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 203

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-150).

subject to a penalty fee of \$25.00.					K.I.G.L. /-1.2-1501(cod)) is		
1. Corporate ID No	2. Name of Corporation			<del></del>			
000103071	L Adv	antage He	alth Services	Tuo	Ì		
3. Street Address Principal Business C	)ffice	3	City	State	Zip		
101 Sun A	VC NE		Albuquerous	1/1/	[ ' ]		
4. Business Phone No.		5. State of Incorporation	· Albertaire		1 87109		
(505) 82	1-3255	1 I	Lorida				
6. Brief Description of the Character of	of Business Conducted in F	thode Island	Por Card				
7. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) ET RITTIN SPA	ACES REECADE HOUNG AN	"TI CYTE TO STATE		
President Name			: Vice President Name	TOUS BEFORE USING AT	TACHMENTS		
\ \ala_a	W/ Die						
Street Address	TU - LJY 15	26011	* 6				
	A	10	Street Address				
City	LA /TVE	7/0					
411	1/11	210	City'	State	Zip		
Secretary Name	1N. N.	87109	· · · · · · · · · · · · · · · · · · ·				
1/11	<u> </u>		: Treasurer Name - CFO	. 1			
Street Address			Michael Kzendzian				
C , J./c			Street Address				
101 31	n Ave 1	YE	101	Sun Ave 1	JE I		
Albuque/que	State A (14	Zip Cand	City	State	Zip		
, , , , , , , , , , , , , , , , , , , ,	MAC	87109	: Albuguera	ue NM	87109		
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) 🗌 FILL IN SI	PACES BEFORE USING A	TTACHMENTS		
Director Name		i	Director Name		İ		
John	W. Drisco		<u> </u>				
Street Address	4	_	Street Address				
101	Ave N	<u>E</u>	<u> </u>				
City	State	Zip	City	State	Zip		
Albuquerane	$\mathcal{N}\mathcal{M}$	87109					
Director Name	,		Director Name				
			:				
Street Address			Street Address				
_							
СПу	State	Ζiμ	City	State	7.		
		İ	* · · · · · · · · · · · · · · · · · · ·	174445	Zip		
		4	: 10. SHARES ISSUED: 7"	Y" POV EOD ATTACTOR			
9. SHARES AUTHORIZED	•	1 000			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)  ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
9. SHARES AUTHORIZED	•	1 DOM CHAIR					
		1,000 Corumer		·			
This information is currently	of record in the Offic	ce of the Secretary of	Number of Shares	Class/Series	Par Value		
This information is currently State. Changes require an ad-	of record in the Offic ditional filing. Sec S	1,000 Overnor ce of the Secretary of Section 9 of	Number of Shares	Class/Series	Par Value		
This information is currently	of record in the Offic ditional filing. See S	L,000 Overment ce of the Secretary of Section 9 of		Class/Series	Par Value		
This information is currently State. Changes require an ad-	of record in the Offic ditional filing. See S	ce of the Secretary of Section 9 of	Number of Shares	·			
This information is currently State. Changes require an adinstruction sheet.	ditional filing. See S	Section 9 of	Number of Shares	ClassSeries	-0/		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed or sheet the state of the st	ditional filing. Sec S	Section 9 of  Oration by an authorized	Number of Shares  // 000	ClassSeries	-0/		
This information is currently State. Changes require an ad-	ditional filing. Sec S	Section 9 of  Oration by an authorized	Number of Shares  // 000	ClassSeries	-0/		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed or sheet the state of the st	ditional filing. Sec S	Section 9 of  Oration by an authorized	Number of Shares  // 000	ClassSeries	-0/		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed or sheet the state of the st	ditional filing. Sec S	Section 9 of  Oration by an authorized	Number of Shares  // 000	ClassSeries	-0/		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed or sheet the state of the st	ditional filing. Sec S	Section 9 of  Oration by an authorized	Number of Shares  1,000  J representative. If the corpor trustee.	Class/Series  Common  Oration is in the hands of	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed or sheet the state of the st	ditional filing. Sec S	Section 9 of  Oration by an authorized	Number of Shares  1,000  I representative. If the corpor trustee.  Under penalty of perju	Class/Series  Common  Oration is in the hands of	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed or sheet the state of the st	ditional filing. Sec S	Section 9 of  Oration by an authorized	I representative. If the corpor trustee.  Under penalty of perjuincluding any accompa	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed this report must be executed or	ditional filing. Sec S	Section 9 of  Oration by an authorized	Number of Shares  1,000  I representative. If the corpor trustee.  Under penalty of perju	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed or sheet the state of the st	ditional filing. Sec S	Section 9 of  Oration by an authorized	Jeropresentative. If the corportrustee.  Under penalty of perjuincluding any accompanded therein arety.	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed this report must be executed of the part of	on behalf of the corpo	Section 9 of  Oration by an authorized  Fraction by the receiver of	I representative. If the corpor trustee.  Under penalty of perjuincluding any accompacentained herein arety.  Signature	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed of this report must	on behalf of the corpo	Section 9 of  Oration by an authorized  Fraction by the receiver of	I representative. If the corpor trustee.  Under penalty of perjuincluding any accompacentained herein arety.  Signature	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed this report must be executed of the part of	on behalf of the corpo	Section 9 of  Oration by an authorized  Fraction by the receiver of	I representative. If the corpor trustee.  Under penalty of perjuincluding any accompacentained herein arety.  Signature	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed of this report must	on behalf of the corpo	Section 9 of  Oration by an authorized	I representative. If the corpor trustee.  Under penalty of perjuincluding any accompacentained herein arety.  Signature	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed this report must be executed of this report must be executed of the control of	on behalf of the corpo	Section 9 of  Oration by an authorized  Fraction by the receiver of	Under penalty of perjuincluding any accompactontained herein arety  Signature  Print or Type Name	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed this report must be executed of this report must be executed of the control of	on behalf of the corpo	Section 9 of  Oration by an authorized  Fraction by the receiver of	I representative. If the corpor trustee.  Under penalty of perjuincluding any accompacentained herein arety.  Signature	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	have examined this report. ents, and that all statements  Date		
This information is currently State. Changes require an adinstruction sheet.  This report must be executed this report must be executed of this report must be executed of the control of	on behalf of the corpo	Section 9 of  Oration by an authorized  Fraction by the receiver of	Under penalty of perjuincluding any accompactontained herein arety  Signature  Print or Type Name	Class/Series  Common  Oration is in the hands of  ry, I declare and affirm that I prying schedules and statem	a receiver or trustee,		