

## State of Rhode Island and Providence Plantations

A. Ralph Mollis
Secretary of State

October 9, 2007

Hairabet & Associates, LLC 2 CHARLES STREET PROVIDENCE, RI 02904-

RE:

Entity ID # 156901

Hairabet & Associates, LLC

Dear Sir or Madam:

Your limited liability company has failed to maintain a Resident Office in this state as evidenced by undeliverable and returned correspondence which was sent to the Resident Agent, JOHN M. HAIRABET at the Resident Office, 2 CHARLES STREET, PROVIDENCE, RI 02904-.

Pursuant to the provisions set forth in Section 7-16-41 of the General Laws of the State of Rhode Island, the Certificate of Organization/Registration of the above named entity will be revoked after 60 days from the date of this notice for failure to maintain a resident office within this state.

Please file a Change of Resident Office form with the Corporations Division within the next sixty days so that your authority to conduct business will remain intact. If you have any questions, or if we can be of any assistance, please do not hesitate to call the Corporations Division at (401) 222-3040.

Sincerely

ate of Rhode Island and Providence Plantations
Ralph Mollis

retary of State
rporations Division
8 W. River Street, Providence, RI 02904-2615

RESORTED IRST CLASS



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X 029 NFE 1 706C 00 10/12/07 ORWARD TIME EXP RTN TO SEND HAIRABET AND ASSOCIATES O BOX 5325 PROVIDENCE RI 02940-6325

RETURN TO SENDER

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ipon completion, please detach and mail the annual report below including payment in the amount of \$50.00 made payable to Secretary of State. If the resident agent to whom the annual report was mailed has changed and/or the address of the resident agent has changed, Form 642, along with the appropriate filing fee if any, must be filed in this office. Form 642 may be obtained by contacting this office at 401-222-3040, or from our web site at www.state.ri.

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Hairabet & Associates, LLC c/o JOHN M. HAIRABET **2 CHARLES STREET** PROVIDENCE, RI 02904-

RETAIN FOR YOUR RECORDS						
ID# 156901						
Hairabet & Associates, LLC						
CHECK NUMBER						
DATE						
DETACH HERE						

State of Rhode Island and Providence Plantations Office of the Secretary of State

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

2007

401.222,3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

n accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

R.I.G.L. 7-16-66 (D&C))		to a penany jee of \$25.00.					
1. ID No. 156901		Exact name of the limited liability company  lairabet & Associates, LLC					
3. State of Formation RHODE ISLAND	4. Brief description of the character of the business which is actually conducted in Rhode Island MEDICAL BILLING AND CONSULTING						
5. Principal office address			City	State	Zip		
5. MAILING ADDRI	ESS OF	LIMITED LIABILITY COMPANY	AND NAME OR TITLE OF CON	ract person:	' 		
tress			•	•			

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Prations Division

W. River Street, Providence, RI 02904-2615

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