RI SOS Filing Number: 200808106520 Date: 03/12/2008 12:10 PM

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

Fee: $50.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

Business Corporation Annual Report

Filing Period: January 1 - March 1

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. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR: 2008

1. Corporate ID No. 000143850

2. Name of Corporation New England Interventional Pain Specialists, Inc.

3. Street Address Principal Business Office:

No. and Street: 102 SMITHFIELD AVENUE
City or Town: PAWTUCKET State: RI Zip: 02860 Country: USA

4. Business Phone No.

401-722-5714

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

TO RENDER PROFESSIONAL MEDICAL SERVICES BY PHYSICIANS SPECIALIZING IN PAIN MANAGEMENT AND DULY LICENSED TO PRACTICE MEDICINE IN RHODE ISLAND

7. Names and Addresses of the Officers and Directors:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	STUART SCHNEIDERMAN M.D.	102 SMITHFIELD AVENUE PAWTUCKET, RI 02860 USA
SECRETARY	STUART SCHNEIDERMAN M.D.	102 SMITHFIELD AVENUE PAWTUCKET, RI 02860 USA
PRESIDENT	STUART SCHNEIDERMAN MD	102 SMITHFIELD AVENUE PAWTUCKET, RI 02860- USA
DIRECTOR	STUART SCHNEIDERMAN M.D.	102 SMITHFIELD AVENUE PAWTUCKET, RI 02860 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
CWP		$1.00	8,000.00	0

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 12 Day of March, 2008 at 12:09:12 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By STUART SCHNEIDERMAN, M.D.
Signature of Authorized Representative of the Corporation

PRESIDENT
Title

Form No. 630
Revised 09/07