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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
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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

1. Corporate ID No.	2. Name of Corporation			
19056	X-RAY ASSOCIATES, INCORPORATED			
3. Street Address Principal Business Office		City	State	Zip
6725 Post Road		North Kingstown	RI	02852
4. Business Phone No.	5. State of Incorporation			
(401) 886-4830	RHODE ISLAND			

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

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
Jerrold R. Robins, MD			Richard A. Black, MD		
Street Address			Street Address		
PO Box 823			275 Meadowtree Farm Road		
City	State	Zip	City	State	Zip
East Greenwich	RI	02818	Saunderstown	RI	02874
Secretary Name			**Treasurer Name**		
Jeffrey E. Silverstein, MD			John R. Caldarelli, MD		
Street Address			Street Address		
176 Wickham Road			210 Legend Rock Road1		
City	State	Zip	City	State	Zip
North Kingstown	RI	02852	South Kingstown	RI	02881

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☑ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name			Director Name		
Jerrold R. Robins, MD			Jeffrey E. Silverstein, MD		
Street Address			Street Address		
PO Box 823			176 Wickham Road		
City	State	Zip	City	State	Zip
East Greenwich	RI	02818	North Kingstown	RI	02852
Director Name			**Director Name**		
Richad A. Black, MD			John R. Caldarelli, MD		
Street Address			Street Address		
275 Meadowtree Farm Road			210 Legend Rock Road		
City	State	Zip	City	State	Zip
Saunderstown	RI	02874	South Kingstown	RI	02881

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐ 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			100	Common	No Par Value
			THIS SECTION MUST BE COMPLETED		

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.

[redacted]

[redacted]

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.

3-17-08
Signature *Date*

Jerrold R. Robins, MD
Print or Type Name

[redacted] President
Title

Form 630 Rev. 12/06

ATTACHMENT FOR
X-RAY ASSOCIATES, INCORPORATED
CORP. I.D. NO. 19056

8. Names and Addresses of the Directors

James W. Blechman, M.D.
185 Peaked Rock Road
South Kingstown, RI 02879

FILED

MAR 24 2008

By_____