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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 2009

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			
66319	The Almonte Fallago Group, Ltd			
3. Street Address Principal Business Office		City	State	Zip
132B Pleasant View Avenue		Smithfield	R.I.	02917
4. Business Phone No	5. State of Incorporation			
401-270-4747	Rhode Island			

6. Brief Description of the Character of Business Conducted in Rhode Island
Consultants to Health Care professionals in Transition as well as Associate Placement

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

President Name			Vice President Name		
Peter A. Almonte			Peter A. Almonte		
Street Address			Street Address		
2 Starling Way			2 Starling Way		
City	State	Zip	City	State	Zip
West Warwick	R.I.	02893	West Warwick	R.I.	02893
Secretary Name			Treasurer Name		
Peter A. Almonte			Peter A. Almonte		
Street Address			Street Address		
2 Starling Way			2 Starling Way		
City	State	Zip	City	State	Zip
West Warrwick	R.I.	02893	west Warwick	R.I.	02893

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

Director Name			Director Name		
Peter A. Almonte					
Street Address			Street Address		
2 Starling Way					
City	State	Zip	City	State	Zip
West Warwick	R.I.	02893			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100		none

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.

Peter A. Almonte — Febry 17 2009
Signature *Date*

Peter A. Almonte
Print or Type Name

[redacted] President
Title

File Date 2-19-09
Check No. 8572
By: MMC

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Form 630 Rev. 08/08