



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(c), 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. 132977		2. Name of Corporation ERIC M. JOHNSEN, DMD, INC.		
3. Street Address Principal Business Office 880 EAST MAIN ROAD		City PORTSMOUTH	State RI	Zip 02871
4. Business Phone No. 401-683-5855		5. State of Incorporation RI		
6. Brief Description of the Character of Business Conducted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name ERIC M. JOHNSEN		Vice President Name		
Street Address 224 HERITAGE AVENUE		Street Address		
City PORTSMOUTH	State RI	Zip 02871	City	State
Secretary Name ERIC M. JOHNSEN		Treasurer Name ERIC M. JOHNSEN		
Street Address 224 HERITAGE AVENUE		Street Address 224 HERITAGE AVENUE		
City PORTSMOUTH	State RI	Zip 02871	City PORTSMOUTH	State RI
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name ERIC M. JOHNSEN		Director Name		
Street Address 224 HERITAGE AVENUE		Street Address		
City PORTSMOUTH	State RI	Zip 02871	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
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.		Number of Shares 1000	Class Series COMMON	Par Value NO PAR

FEB 25 11:10:55
 CORPORATIONS DIVISION

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.

FILED

FEB 25 2009

File Date _____ BY MMF

Check No. _____

By: _____

FOR SECRETARY OF STATE USE ONLY

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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.

Signature E. M. Johnson Date 11/3/08

Print or Type Name Eric M. Johnson

Title President

February 6, 2009

Eric M. Johnsen, D.M.D.
880 East Main Road
Portsmouth, RI 02871
(401) 683-5855

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

Dear Sir or Madam:

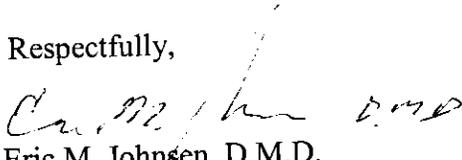
Please accept the enclosed application for reinstatement of my corporate charter. I have enclosed the required Letter of Good Standing from the Division of Taxation along with a check in the amount of \$100 for the required fees, and a copy of my corporate return form 630.

Please mail the reinstatement to me at Eric M. Johnsen D.M.D., 880 East Main Road Portsmouth, RI 02871.

I can be reached at (401) 683-5855 during office hours or at (401) 487-1627 if you have any questions.

Thank you in advance for your cooperation.

Respectfully,


Eric M. Johnsen, D.M.D.