

FOR SECRETARY OF STATE USE ONLY

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.

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* In accordance with R.I.G.	.L. 7-1.2-1501(e), each co	rporation failing or refusing to f	ile its annual report within thirty	(30) days after the time prescribed by	law (R.I.G.L. 7-1.2-1501(c&d)) i
subject to a penalty fee of \$2				, , , , ,	

subject to a penalty fee of \$25.00.				,,		
1. Corporate ID No.	2. Name of Corporation					
161600 IlluminOss Medical, Inc.						
3. Street Address Principal Business ( 993 Waterman Avenue	Office		East Providence	State Rhode Island	2ip 02914	
4. Business Phone No. 5. State of Incorporation		, ,				
401.714.0008 Delaware						
6. Brief Description of the Character						
Development and manufac				CHO DEPODE TICKNO	THE CHARTENAND	
7. NAMES AND ADDRESSES President Name	OF THE OFFICER	SI ( A BUX FUR ALLA	Vice President Name	CES BEFORE USING A	ITALIMENIA	
Robert A. Rabiner			· · · · · · · · · · · · · · · · · · ·			
Street Address			Street Address			
993 Waterman Avenue			in the same of the			
City	State	Zip	Cuy	State	Zifi	
East Providence	Rhode Island	02914				
Socretary Name		***************************************	: Treasurer Name			
Robert A. Rabiner			Robert A. Rabiner			
Street Address			Street Address			
Same as above			Same as above			
City	State	Zip	City	Stato	Zip	
a wasana tan tanawasa	A Transfer Company		:			
5: NAMES AND ADDRESSES  Director Name	OF THE DIRECTO	RS: ( A BUA FUR ALI	ACHMENT) THE IN SPACES BEFORE USING ATTACHMENTS  Director Name			
Robert A. Rabiner			Arnold-Peter C. Weiss			
Street Address			Street Address			
Same as above			993 Waterman Avenue			
City	State	Zip	Gitv	State	Zip	
·		'	East Providence	Rhode Island	02914	
Director Name			Director Name			
Lee R. Wrubel			Harry T. Rein			
Street Address		•	Street Address			
993 Waterman Avenue			993 Waterman Avenue			
City -	State	Zip	City	State	Zip	
East Providence	Rhode Island	02914	East Providence	Rhode Island	02914	
9. SHARES AUTHORIZED	<b>进展的数据</b>	(1) 40 X 46 (2) 24 (4) 4 (4)	10. SHARES ISSUED (*	。 "我们的我们是我们的我们的我们的人们是这种人的人们是	MENT)	
			ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
This information is currently			Number of Shares	Class/Series	Par Value	
State. Changes require an ac	Iditional filing. Sec	e Section 9 of	9,500,000	CWP	.01	
instruction sheet.			12.037.500	3 9 8 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	235 201 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			29,224,813	PWP/B	.01	
This report must be executed	on behalf of the ec	rnoration by an authorize	d representative. If the corr	oration is in the hands	of a receiver or trustee	
this report must be executed				porumon is in the names	or a receiver or trastee,	
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			Signature Date			
Check No FEB 2 4 2009		Ó# Q≥	,	$\mathbb{V}$		
- 4719			David Dykeman	<b>v</b>		
By: 101 /00/			Print or Type Name			

Assistant Secretary
Title

## IlluminOss Medical, Inc.

## 2009 Annual Report Continuation

Additional Officers:

David J. Dykeman, Assistant Secretary c/o Greenberg Traurig One International Place Boston, Massachusetts 02110

Additional Directors:

John A. Pafford 993 Waterman Avenue East Providence, Rhode Island 02914

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