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FOR SECRETARY OF STATE USE ONLY

 $By: \mathbf{By}$

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 AfraidToAsk.com, Inc. 105821 3. Street Address Principal Business Office 610 Ten Rod Road, Second Floor 11 30 North Kingstown RI 02852 401-294-2328 Rhode Island 6. Brief Description of the Character of Business Conducted in Rhode Island To disseminate medically-related information 7. NAMES AND ADDRESSES OF THE OFFICERS: ("x" box for attachment) $\ \ \ \$ fill in spaces before using attachments President Name Vice President Name Jonathan Bertman, M.D. Charles Schachter 1130 Ten Street Address Street Address 10 Raleigh Court 610 Ten Rod Road, Second Floor 07960 North Kingstown RI 02852 Morristown NJ Secretary Name Treasurer Name Jonathan Bertman, M.D. None Street Address Street Address 610 Ten Rod Road, Second Floor City State Zip RI 02852 North Kingstown 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT). 🗌 FILL IN SPACES BEFORE USING ATTACHMENTS Director Name None Street Address Street Address State Zip City Zψ State Director Name Street Address Street Address State Zio City Zip 9. SHARES AUTHORIZED 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED Number of Shares Par Value This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of \$0.01 100 Common instruction sheet. THE SECTE 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. 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. FILED Signature

Jonathan Bertman, M.D.

Print or Type Name

President

Title

Form 630 Rev 08/08