

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

401.222.30

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(cc*d)) is subject to a penalty fee of \$25.00.

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1. Corporate ID No.	2 PAS 113	a RADO	emy me.		Zib
Street Address Principal Buss		1	Providence	State R 1	02903
i. Business Phone No.		5. State of Incorporation	***		
HOL 369 Brief Description of the Char	vacter of Business Conducted in	1 Rhode Island	a Program	~7	
nursing	USSIF FAR	Rhode Island The fraction S. ("Y" BOY FOR ATTA			ATTACHMENTS
NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC			: Vice President Name		
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йу	State	[-	<u>:</u>		C ATTACHMENITS
. NAMES AND ADDRE	SSES OF THE DIRECTO	ORS: ("X" BOX FOR ATT	TACHMENT) TILL IN SP	ACES BEFORE USING	3 ATTACHMENTS
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ireet Address			Street Address		
Жу	State	Zip	City	State	Zip
Director Name		L	Director Name	,	
			Street Address		
Street Address					
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZ	LED .	I	10. SHARES ISSUED (".		
1000			ISSUED SHARES — THIS SECTION Number of Shares	Class/Series	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			1000	()K	0.01
instruction sheet.					
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This report must be ex	ecuted on behalf of the cuted on behalf of the c	corporation by an authoriz orporation by the receiver	ed representative. If the corpor trustee.	ooration is in the hand	s of a receiver of itusiee,
this report must be exc					
	FILED		II. dan annoltu of nori	oer. I declare and affirm	that I have examined this re
	MAR 0 6 2009	22.72	including any accomp	canying schedules and st	atements, and that all states
0	/ \ (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	200	contained herein are t	rue and correct.	03/15/0
File DateB	30	_ 	Signature		Date
Check No.		1 Nd 9- 84M 6002		& BASTIE	₹ <u> </u>
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FOR SECRETAR	Y OF STATE USE ONLY	PROBLING FINE	Title		Earn 620 Day 08/0
		11-14-14			Form 630 Rev. 08/08