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State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Business Corporation Annual Report

Filing Period: January 1 - March 1

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.

ANNUAL REPORT YEAR: 2010

1. Corporate ID No. 000128224

2. Name of Corporation OST Medical, Inc.

3. Street Address Principal Business Office:

No. and Street: 11 KNIGHT STREET, BLDG. F-23
City or Town: WARWICK State: RI Zip: 02886 Country: USA

4. Business Phone No.

(401)737-3774

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

TO ENGAGE IN THE SALE AND DISTRIBUTION OF MEDICAL DEVICE PRODUCTS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	ROBERT A PERETTI ESQ	1536 WESTMINSTER STREET PROVIDENCE, RI 02909 USA
SECRETARY	ROBERT A PERETTI ESQ.	1536 WESTMINSTER STREET PROVIDENCE, RI 02909 USA
CEO	CARLO RUGGERI	21 LENNON ROAD LINCOLN, RI 02865 USA
COO	PETER J SACCHETTI	42 MULBERRY STREET #1 ATTLEBORO, MA 02703 USA
PRESIDENT	PETER J SACCHETTI	42 MULBERRY STREET #1 ATTLEBORO, MA 02703- USA
DIRECTOR	CARLO RUGGERI	21 LENNON ROAD LINCOLN, RI 02865 USA
DIRECTOR	PETER J SACCHETTI	42 MULBERRY STREET #1 ATTLEBORO, MA 02703 USA
DIRECTOR	ROBERT H BERT	105 WILDFLOWER DRIVE CRANSTON, RI 02921 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
CWP		$0.01	8,000.00	1924

9. 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.

Signed this 6 Day of July, 2010 at 2:09:43 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By ROBERT A. PERETTI, ESQ.
Signature of Authorized Representative of the Corporation

SECRETARY/TREASURER
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07