

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2011

401.222.30Filing 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(cord)) is subject to a penalty fee of \$25.00. 401.222,3040

| 1. Corporate ID No. 126473 | | rporation O.M. DELSESTO, M.D. MS | , LTD. | | |
|--|--|-------------------------------------|---|--|---|
| 3. Street Address Principal Business Office 2358 South County Trail | | | City East Greenwich | State RI | Ζήν 02818 |
| 4. Business Phone No. 5. State of Incorporation 401-886-6000 Rhode Island | | | | 102010 | |
| 6. Brief Description of the Chara To engage in the genera | cter of Business Condi al practice of med | ucted in Rhode Island licine | | | |
| | SES OF THE OFF | ICERS: ("X" BOX FOR ATTA | CHMENT) TILL IN SI | PACES BEFORE USING | G ATTACHMENTS |
| Richard M. DelSesto | | | Richard M. DelSesto | | |
| Street Address 2358 South County Trail | | | Street Address 2358 South County Trail | | |
| City East Greenwich | State RI | <i>次</i> φ 02818 | East Greenwich | State RI | ^{Zip} 02818 |
| Secretary Name Richard M. DelSesto | | | Treasurer Name Richard M. DelSesto | *************************************** | • |
| Street Address 2358 South County Trail | | | Street Address 2358 South County Trail | | |
| City East Greenwich | State RI | ^{Zip} 02818 | City: East Greenwich | State RI | Zip 02818 |
| Richard M. DelSesto | ES OF THE DIRE | ECTORS: ("X" BOX FOR ATT | ACHMENT) FILL IN S Director Name None | SPACES BEFORE USIN | NG ATTACHMENTS |
| Street Address 2358 South County Tra | nil | | Street Address | | |
| City East Greenwich | State RI | <i>Ζιρ</i> 02818 | Сцу | Statte | Zip |
| Director Name None | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Director Name None | | |
| Street Address | | | Street Address | , | |
| Жу | State | Zip | CH)· | State | Zip |
| . SHARES AUTHORIZED | l | i | 10. SHARES ISSUED (| <i>"X" BOX FOR ATTAC</i> ION <u>MUST</u> BE COMPLETED | HMENT) |
| 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 | Class/Series | Par Value |
| | | | 100 | common | по раг |
| | | | | | |
| | | | I | poration is in the hand | 1 |

| File Date FEB 2 8 2011 Check No. By Signature Richard M. DelSesto | FILED | 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. | | |
|--|---------------------------------|---|--|--|
| Richard M. DelSesto Print or Type Name President | FEB 2 8 2011 | | | |
| Richard M. DelSesto Print or Type Name President | a mne | Signature Date | | |
| President | | Richard M. DelSesto | | |
| FOR SECRETARY OF STATE USE ONLY | 1005 | Print or Type Name | | |
| | FOR SECRETARY OF STATE USE ONLY | President | | |