

penalty fee of \$25.00.

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street

Providence. RI 02904-2615 401.222,3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK. In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a

1. Corporate ID No. 2. Name of Corporation 133085 FOUNDATION FOR RESEARCH IN ACUPUNCTURE & INTEGRATIVE MEDICINE, INC. 3. State of hicorporation 4. Corporate address in Rhode Island - Street Address RHODE ISLAND 314 OLIPHANT LANE MIDDLETOWN 02842 5. Foreign corporation. Enter principal office address City State 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island CONDUCTING SCIENTIFIC AND MEDICAL RESEARCH IN THE FIELDS OF ACUPUNCTURE AND INTEGRATIVE MEDICINE President Name Vice President Name ALEX TATEVIAN NINA TATEVIAN Street Address Street Address 141 AIRPORT ROAD 3027 BROOKS COURT City State Zip CitvState ZibWARWICK RI 02889 **PEARLAND** TX 77584 Secretary Name Treasurer Name LENA KASHMENSKY **ALEX TATEVIAN** Street Address Street Address 141 AIRPORT ROAD 141 AIRPORT ROAD СЦу State Zip Сйу State ZipWARWICK lRI 02889 WARWICK RI 02889 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name **ALEX TATEVIAN** LENA KASHMENSKY Street Address 141 AIRPORT ROAD 141 AIRPORT ROAD City State ZipState WARWICK RΙ 02889 WARWICK Rί 02889 Director Name Director Name NINA TATEVIAN **CAROLYN KELLNER** Street Address Street Address 3027 BROOKS COURT 3502 WAKE ROBIN ROAD City State Zφ ZibPEARLAND lтх 77584 ^I LINCOLN RI 02865 9. REGISTERED AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

133085	Under penalty of perjury, I declare and affirm that report, including any accompanying schedules and s
File Date	statements contained herostophysing sententes and statements contained herostophysing sententes and statements of Officer
By:	ALEX TATEVIAN Print or Type Name of Officer PRESIDENT Title of Officer

I have examined this tatements, and that all