



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

**Foreign 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: 2012

1. Corporate ID No. 000298053

2. Name of Corporation Given Imaging, Inc.

3. Street Address Principal Business Office:

No. and Street: 3950 SHACKLEFORD RD, STE 500

City or Town: DULUTH

State: GA Zip: 30096 Country: USA

4. Business Phone No.

5. State of Incorporation

State: DE

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

Retail sales of medical supplies

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CFO	ED CORDELL	3950 SHACKLEFORD RD, STE 500 DULUTH, GA 30096 USA
VICE PRESIDENT, OPERATIONS	STEVE MURRAY	3950 SHACKLEFORD RD, STE 500 DULUTH, GA 30096 USA
SECRETARY/DIRECTOR	KEVIN RUBEY	3950 SHACKLEFORD RD, STE 500 DULUTH, GA 30096 USA
CONTROLLER	SUBHASH SARDA	3950 SHACKLEFORD RD, STE 500 DULUTH, GA 30096 USA
CEO/DIRECTOR	NACHUM HOMI SHAMIR	3950 SHACKLEFORD RD, STE 500 DULUTH, GA 30096 USA
SENIOR VICE PRESIDENT, HUMAN RESOURCES	KEITH CHRZANOWSKI	3950 SHACKLEFORD RD, STE 500 DULUTH, GA 30096 USA
DIRECTOR	YUVAL YANAI	3950 SHACKLEFORD RD, STE 500 DULUTH, GA 30096 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$1.00	1,500.00	1500

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 19 Day of January, 2012 at 3:28:02 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 BRITNI WIGE
Signature of Authorized Representative of the Corporation

POA
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

