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

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 2012

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(c&d)) is subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation			
512770	American Radiographics, Inc.			
3. Street Address Principal Business Office	City	State	Zip	
68 Buttonwood Street	Bristol	RI	02809	
4. Business Phone No.	5. State of Incorporation			
401-253-5500	Massachusetts			
6. Description of the Character of Business Conducted in Rhode Island				
Remanufacture and sale of diagnostic x-ray equipment				

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Officer Name	Street Address	City	State	Zip
President: Krishnan Suthanthiran	6718 Springfield Drive	Lorton	VA	22079
Treasurer: Ruth Bergin	6049 N. Morgan Street	Alexandria	VA	22312
Vice President: Krishnan Suthanthiran	6718 Springfield Drive	Lorton	VA	22079

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
Krishnan Suthanthiran	6718 Springfield Drive	Lorton	VA	22079

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
4,000	Common	No Par

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES – THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
3000	Common	No Par

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.

FILED

File Date FEB 06 2012

Check No.

By: 10718

FOR SECRETARY OF STATE USE ONLY

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.

Signature *Date* 1/20/2012

Ruth Bergin
Print or Type Name

Secretary
Title

72921-120-722904

Form 630 Rev. 12/06