



**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:** 2013

**1. Corporate ID No.** 000084537

**2. Name of Corporation** MRI Contract Staffing, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 1717 ARCH ST., 35TH FLOOR

City or Town: PHILADELPHIA

State: PA Zip: 19103-2768 Country: USA

**4. Business Phone No.**

**5. State of Incorporation**

State: OH

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

Provides staffing services to MRI franchisees in the US.

**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
PRESIDENT	ROBERT K. ROMAIN JR.	1717 ARCH ST., 35TH FLOOR PHILADELPHIA, PA 19103-2768 USA
TREASURER	THOMAS S. VERRATTI	1717 ARCH ST. PHILADELPHIA, PA 19103-2768 USA
SECRETARY	MICHAEL K. RODE	1717 ARCH ST., 35TH FLOOR PHILADELPHIA, PA 19103-2768 USA
DIRECTOR	ROBERT K. ROMAIN JR.	1717 ARCH ST., 35TH FL. PHILADELPHIA, PA 19103-2768 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>
CNP		\$0.0000	100.00	10

**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 14 Day of February, 2013 at 12:14:53 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 TRACI HOUCK  
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

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