



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 2013

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. 257026		2. Name of Corporation SpineTech P.T., Inc.			
3. Street Address Principal Business Office 1528 Cranston Street			City Cranston	State RI	Zip 02920
4. Business Phone No. 401-942-1633		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Physical Therapy					
7. NAMES AND ADDRESSES OF THE OFFICERS (X) BOX FOR ATTACHMENTS () FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Dr. Robert A. L'Europa			Vice President Name Dr. Robert A. L'Europa		
Street Address 1528 Cranston Street			Street Address 1528 Cranston Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Dr. Robert A. L'Europa			Treasurer Name Dr. Robert A. L'Europa		
Street Address 1528 Cranston Street			Street Address 1528 Cranston Street		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. NAMES AND ADDRESSES OF THE DIRECTORS (X) BOX FOR ATTACHMENTS () FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Dr. Robert A. L'Europa			Director Name		
Street Address 1528 Cranston Street			Street Address		
City Cranston	State RI	Zip 02920	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED (X) BOX FOR ATTACHMENTS ()					
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares 100		Class/Series Common		Par Value 0.01	
THIS SECTION MUST BE COMPLETED					

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

MAR 21 2013

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.

File Date
Check No.
FOR SECRETARY OF STATE USE ONLY

By mmc
CR # 12182

Signature [Signature] 2/24/13
Dr. Robert A. L'Europa
Print or Type Name
President
Title