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 2014

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. Brief 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**

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

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

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

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.

[redacted] [redacted]

File Date _____

Check No. _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

FEB 11 2014

BY 11444

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* 1/3/2014

Ruth Bergin
Print or Type Name

[redacted]

Secretary
Title

Form 630 Rev. 12/06