



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 118036		2. Exact name of the Corporation Rhode Island Cardiovascular Group, Inc.			
3. Principal office address 68 Cumberland Street, Ste. 103		City Woonsocket	State RI	Zip 02895	
4. Business Phone No. 401-769-4100		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island To render professional medical services and consultation. To engage in the licensed practice of medicine.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Kirit Desai, M.D.			Vice-President Name		
Street Address 16 Briar Road			Street Address		
City Lincoln	State RI	Zip 02865	City	State	Zip
Secretary Name Joseph Mazza, M.D.			Treasurer Name Joseph Mazza, M.D.		
Street Address 8 Green View			Street Address 8 Green View		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name Kirit Desai, M.D.			Director Name Joseph Mazza, M.D.		
Street Address 16 Briar Road			Street Address 8 Green View		
City Lincoln	State RI	Zip 02865	City Cumberland	State RI	Zip 02864
Director Name Thomas Lanna, M.D.			Director Name Sajid Siddiq, M.D.		
Street Address 68 Cumberland Street, Ste. 103			Street Address 68 Cumberland Street, Ste. 103		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			7	Common	No Par Value

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.

File Date

Check No

By:

FOR SECRETARY OF STATE USE ONLY

FILED
MAR 11 2014

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 of Authorized Representative

Date

Kirit Desai, M.D.

Print or Type Name of Authorized Representative

RHODE ISLAND CARDIOVASCULAR GROUP, INC.
Corp. ID #118036
Attachment to 2014 Annual Report

Additional Directors:

George Bourganos, M.D.
68 Cumberland Street, Suite 103
Woonsocket, RI 02895

A. Rita Peter-Faherty, M.D.
68 Cumberland Street, Suite 103
Woonsocket, RI 02895

N. Christopher Kelley, M.D.
68 Cumberland Street, Suite 103
Woonsocket, RI 02895

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MAR 11 2014

BY FD 118036