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

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: 2015

1. Corporate ID No. 000509787

2. Name of Corporation Expert Medical Navigation, Inc.

3. Street Address Principal Business Office:

No. and Street: 9 WEST RIDGE ROAD
City or Town: TIVERTON State: RI Zip: 02878 Country: USA

4. Business Phone No.

800-646-9305

5. State of Incorporation

State: RI

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

HEALTH CARE EDUCATION & BENEFIT SERVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SECRETARY	IBRAHIM GEORGE EID DR	9 WEST RIDGE ROAD TIVERTON, RI 02878 USA
PRESIDENT	IBRAHIM GEORGE EID DR	9 WEST RIDGE ROAD TIVERTON, RI 02878 USA
TREASURER	IBRAHIM GEORGE EID DR	9 WEST RIDGE ROAD TIVERTON, RI 02878 USA
CHIEF OPERATING OFFICER	RICHARD A. MATEUS	277 PLEASANT STREET FALL RIVER, MA 02722 USA

DIRECTOR	RICHARD A. MATEUS	277 PLEASANT STREET FALL RIVER, MA 02722 USA
DIRECTOR	IBRAHIM GEORGE EID DR	9 WEST RIDGE ROAD TIVERTON, RI 02878 USA
DIRECTOR	MALCOLM MCGUIRE	7296 E. SAN ALFREDO DRIVE SCOTTSDALE, AZ 85258 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
PWP	AA	$0.0010	1,000,000.00	99371
CWP		$0.0010	1,000,000.00	480340

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 January, 2015 at 2:09:24 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 IBRAHIM G. EID, M.D,, PRESIDENT
Signature of Authorized Representative of the Corporation

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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