



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

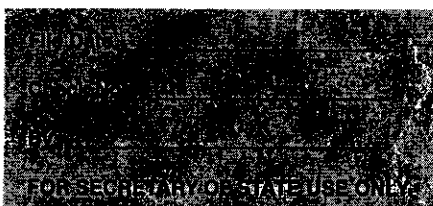
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

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. 44392		2. Exact name of the Corporation Thomas R. Walek, M.D., Inc.			
3. Principal office address 200 Tollgate Road, Suite 102			City Warwick	State RI	Zip 02886
4. Business Phone No. 401-738-7659			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island General practice of medicine, including the specialization in plastic, reconstructive, hand and cosmetic surgery.					
President Name Thomas R. Walek			Vice-President Name Thomas R. Walek		
Street Address 200 Tollgate Road, Suite 102			Street Address 200 Tollgate Road, Suite 102		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name Thomas R. Walek			Treasurer Name Thomas R. Walek		
Street Address 200 Tollgate Road, Suite 102			Street Address 200 Tollgate Road, Suite 102		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT					
Director Name Thomas R. Walek			Director Name		
Street Address 200 Tollgate Road, Suite 102			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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
			1000	COMMON	NONE

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 05 2015

BY

9760

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

Thomas R. Walek, President

Print or Type Name of Authorized Representative