

	<b>State of Rhode Island and Providence Plantations</b> <b>Office of the Secretary of State</b>	<b>Fee: \$50.00</b>
Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040		

<b>ANNUAL REPORT YEAR:</b> <u>2016</u>		
<b>1. Corporate ID No.</b> <u>000072869</u>		
<b>2. Name of Corporation</b> <u>Diagnostic Medical Systems, Inc.</u>		
<b>3. Street Address Principal Business Office:</b>		
No. and Street: <u>51 SUNSET BOULEVARD</u>		
City or Town: <u>NARRAGANSETT</u> State: <u>RI</u> Zip: <u>02882</u> Country: <u>USA</u>		
<b>4. Business Phone No.</b>		
<u>401-789-5847</u>		
<b>FILED</b>		
<b>5. State of Incorporation</b>		
State: <u>MA</u>		
FEB 24 2016 BY <u>H873DS</u>		
<b>6. Brief Description of the Character of Business Conducted in Rhode Island</b>		
<u>PROVIDING MEDICAL TESTING SERVICES AT THE DIRECTION OF HOSPITALS, CLINICS, PHYSICIANS, ETC.</u>		
<b>7. Names and Addresses of the Officers and Directors:</b>		
All officers and directors must be listed.		
<b>Title</b>	<b>Individual Name</b>	<b>Address</b>
	<small>First, Middle, Last, Suffix</small>	<small>Address, City or Town, State, Zip Code, Country</small>
TREASURER	WILLIAM C DEMOS	51 SUNSET BOULEVARD NARRAGANSETT, RI 02882 USA
SECRETARY	MARY SUSAN DEMOS	51 SUNSET BOULEVARD NARRAGANSETT, RI 02882 USA
PRESIDENT	WILLIAM C DEMOS	51 SUNSET BLVD NARRAGANSETT, RI 02882 USA
DIRECTOR	WILLIAM C DEMOS	51 SUNSET BOULEVARD

DIRECTOR

MARY SUSAN DEMOS

NARRAGANSETT, RI 02882 USA

51 SUNSET BOULEVARD  
NARRAGANSETT, RI 02882 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized	Total Issued and Outstanding
			Shares <i>Number of Shares</i>	<i>Num of Shares</i>
CWP		\$1.0000	1,000.00	1,000.00

**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.**

**Filer's Contact Information**

*(Enter a contact name, mailing address and email.)*

Contact Name: William Demos

Business Name: Diagnostic Medical Systems, Inc.

No. and Street: 51 SUNSET BOULEVARD

City or Town: NARRAGANSETT

State: RI

Zip: 02882

Country: USA

Contact Phone: ext:

Contact Email:

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

**Signed this 14 Day of February, 2016 at 10:01:42 AM. 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 William C. Demos

Signature of Authorized Representative of the Corporation



**FILED**

FEB 24 2016

BY

*H873 CK*  
*JP 72869*

Make Corrections

Accept

Form No. 630  
Revised 09/07