State of	of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business	s Services	
	148 W. River S		
	Providence RI 029 (401) 222-30		
HOPE	(401) 222-30	+0	
Business Corporation			
Annual Report Filing Period: January 1 - March 1			
		e i centra	
In accordance with R.I.G.L. 7-1.2- annual report within thirty (30) day			
(c&d)) is subject to a penalty fee			
ANNUAL REPORT YEAR: 2016	2		
1. Corporate ID No. 00014	4929		
2. Name of Corporation Gabr	iel M. Hayek, DMD, Inc.		
3. Street Address Principal Bus	siness Office:		
No. and Street: 1009 MAIN	AVENUE, SUITE 302B		
City or Town: WARWICK		State: <u>RI</u> Zip: <u>02886</u> C	Country: <u>USA</u>
4. Business Phone No.			
<u>401-737-1929</u>			
5. State of Incorporation			
State: <u>RI</u>			
6. Brief Description of the Cha	racter of Business Conducte	d in Rhode Island	
TO ENGAGE IN THE PRAC	<u> TICE OF DENTISTRY, TO</u>	PRESCRIBE, DIAGNOSE	AND
OPERATE FOR ANY			
PHYSICAL CONDITION OF	THE HUMAN TEETH		
7. Names and Addresses of the	e Officers and Directors:		
All officers and directors m		or directors have been elect	ted, the title
Incorporator is no longer a	oplicable; please delete.		
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zi	p Code, Country
SECRETARY	LEE WHITNEY	5 JUNIPER DF EAST GREENWICH, RI 02	
PRESIDENT	GABRIEL M HAYEK DMD	5 JUNIPER DE	
		EAST GREENWICH, RI 02	
DIRECTOR	GABRIEL M HAYEK, DMD	5 JUNIPER DF	RIVE

EAST GREENWICH, RI 02818 USA

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
STK		\$0.0000	8,000.00	0
signatory, under penalties of act and deed of the corpora	0100			
electronic filing, in complia		ws § 7-1.2.		e of the
<i>electronic filing, in complia</i> By <u>GABRIEL M. HAYEK</u> Signature of Authorized I		-		e of the