



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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BUSINESS DIV

2016 OCT 25 PM 2:44

Annual Report for the year: 2016  
Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <u>509862</u>		2. Exact name of the Limited Liability Company <u>GHT Dermatology, LLC</u>			
3. NAICS Code <u>54</u>		4. Brief description of the character of business conducted in Rhode Island <u>medical Services</u>			
5. State of Formation <u>Rhode Island</u>					
6. Principal Office Address <u>123 Hilary Drive</u>		City <u>Providence</u>		State <u>RI</u>	Zip <u>02908</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Gladys Telang MD.</u>			Contact Title		
Street Address <u>123 Hilary Drive</u>		City <u>Providence</u>		State <u>RI</u>	Zip <u>02908</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <u>None</u>			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<b>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.</b>					
Name of Authorized Person <u>GLADYS H TELANG M.D</u>				Date <u>10-25-16</u>	
Signature of Authorized Person <u>Gladys H Telang MD</u>					

FILED

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov

OCT 25 2016

By 286875  
KM