



**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

**Foreign 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: 2017

1. Corporate ID No. 001660569

2. Name of Corporation Checkpoint Surgical, Inc.

3. Street Address Principal Business Office:

No. and Street: 22901 MILLCREEK BOULEVARD
SUITE 110

City or Town: CLEVELAND State: OH Zip: 44122 Country: USA

4. Business Phone No.

216-378-9107

5. State of Incorporation

State: DE

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 454390

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

DEVELOPMENT AND SALES OF MEDICAL DEVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	LEONARD M. COSENTINO	22901 MILLCREEK BOULEVARD, SUITE 110 CLEVELAND, OH 44122 USA

VP OF SALES/SECRETARY	DONALD HUBBARD	22901 MILLCREEK BLVD., SUITE 110 CLEVELAND, OH 44122 USA
CHAIRMAN OF THE BOARD	GEOFFREY THROPE	22901 MILLCREEK BLVD., SUITE 110 CLEVELAND, OH 44122 USA
VICE PRESIDENT CLINICAL SERVICES	KEVIN SCANLAN	22901 MILLCREEK BLVD., SUITE 110 CLEVELAND, OH 44122 USA
DIR OF FINANCE/TREASURER	LAURA KECK	22901 MILLCREEK BLVD., SUITE 110 CLEVELAND, OH 44122 USA
DIRECTOR	TRACY MARSHBANKS	ONE S. WACKER DR., STE 3900 CHICAGO, IL 60606 USA
DIRECTOR	RAYMOND RACKLEY MD	3199 FALMOUTH RD. SHAKER HEIGHTS, OH 44122 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP	A	\$0.0010	33,275,000.00	19700000
CWP	B	\$0.0010	1,425,000.00	0
PWP	A	\$0.0010	6,000,000.00	6000000
PWP	B	\$0.0010	9,920,000.00	7509145

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 2 Day of March, 2017 at 8:50:33 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 LAURA KECK
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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