



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017
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 001658346		2. Exact name of the Limited Liability Company Pharmaceutical Care Integration, LLC			
3. NAICS Code 81 - Other Services (except <input type="checkbox"/>)		4. Brief description of the character of business conducted in Rhode Island medication management consultants			
5. State of Formation California					
6. Principal Office Address 2151 Michelson Drive, Suite 142		City Irvine	State CA	Zip 92612	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Jason Tran		Contact Title Operations Manager			
Street Address 2151 Michelson Drive, Suite 142		City Irvine	State CA	Zip 92612	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City Orange		State			
Manager Name		Manager Name			
Street Address		Street Address			
City		State	Zip	City	
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.					
<i>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.</i>					
Name of Authorized Person Michael A. Uranga				Date 8/14/2017	
Signature of Authorized Person SIGN DOCUMENT HERE <i>ma uranga</i>					

MAIL TO:
Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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