



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2019**

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

FILED

MAR 25 2019

BY

11293 DS

1. Entity ID Number 1187036		2. Exact name of the Corporation Rhode Island Cardiovascular Group, Inc.			
3. Principal Office Address 68 Cumberland Street, Ste. 103		City Woonsocket		State RI	Zip 02895
4. NAICS Code 621111		6. Brief description of the character of business conducted in Rhode Island To render professional medical services and consultation. To engage in the licensed practice of medicine.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Sajid Siddiq, M.D.			Vice-President Name		
Street Address 68 Cumberland Street, Ste. 103			Street Address		
City Woonsocket	State RI	Zip 02895	City	State	Zip
Secretary Name Joseph Mazza, M.D.			Treasurer Name Joseph Mazza, M.D.		
Street Address 68 Cumberland Street, Ste. 103			Street Address 68 Cumberland Street, Ste. 103		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☒					
Director Name Joseph Mazza, M.D.			Director Name Sajid Siddiq, M.D.		
Street Address 68 Cumberland Street, Ste. 103			Street Address 68 Cumberland Street, Ste. 103		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
Director Name George Bourganos, M.D.			Director Name Thomas Lanna, M.D.		
Street Address 68 Cumberland Street, Ste. 103			Street Address 68 Cumberland Street, Ste. 103		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
9. Shares Authorized					
10. Shares Issued Check the box to indicate an attachment ☐					
This information is currently of record in the Department of State.					
Changes require an additional filing.					
NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
8		Common		No par value	
11. 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.					
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.					
Name of Authorized Representative Joseph Mazza, M.D.					Date 3/19/19
Signature of Authorized Representative					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

RHODE ISLAND CARDIOVASCULAR GROUP, INC.
Corp. ID #118036
Attachment to 2019 Annual Report

Additional Directors:

A. Rita Peter-Faherty, M.D.
68 Cumberland Street, Suite 103
Woonsocket, RI 02895

N. Christopher Kelley, M.D.
68 Cumberland Street, Suite 103
Woonsocket, RI 02895

David Donaldson, M.D.
68 Cumberland Street, Suite 103
Woonsocket, RI 02895

Richard Regnante, M.D.
68 Cumberland Street, Suite 103
Woonsocket, RI 02895

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