



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

FILED
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3961

Annual Report for the year: 2019
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 158309		2. Exact name of the Limited Liability Company Mark Rosenberg, M.D., LLC			
3. NAICS Code 334510		4. Brief description of the character of business conducted in Rhode Island Medical Office and any other activities allowed by law.			
5. State of Formation Rhode Island					
6. Principal Office Address 63 Sockanosset Cross Road, Suite 301			City Cranston	State RI	Zip 02920
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Mark Rosenberg, M.D., LLC			Contact Title Member		
Street Address 65 Sockanosset Cross Road, Suite 301			City Cranston	State RI	Zip 02920
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Mark Rosenberg, M.D.			Manager Name		
Street Address 65 Sockanosset Cross Road, Suite 301			Street Address		
City Cranston	State RI	Zip 02920	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.					
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 Person Mark Rosenberg, M.D.				Date 10/20/19	
Signature of Authorized Person <i>Mark Rosenberg</i> SIGN DOCUMENT HERE					

MAIL TO:

Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
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 Website: www.sos.ri.gov