State	e of Rhode Island and Pr Office of the Secret		Fee: \$50.00
	Division Of Busines 148 W. River S Providence RI 029 (401) 222-30	Street 04-2615	
HOPE	()		
Business Corporation Annual Report Filing Period: January 1 - March	1		
	2-1501(e), each corporation fail lays after the time prescribed by e of \$25.00.		
ANNUAL REPORT YEAR: 20	20		
1. Corporate ID No. 000	020262		
2. Name of Corporation Op	hthalmic Surgeons, Ltd.		
3. Street Address Principal B	Business Office:		
No. and Street: <u>1524 ATW</u> City or Town: <u>JOHNSTO</u>	OOD AVENUE, STE 240 N	State: <u>RI</u> Zip: <u>02919</u> Cou	untry: <u>USA</u>
4. Business Phone No.			
5. State of Incorporation			
State: <u>RI</u>			
	ARTICLE III		
-	e that best describes the primary ormation on <u>NAICS</u> can be found	v business conducted by the entity d online.	/. Download
<u>621320</u>			
6. Brief Description of the Cl	naracter of Business Conduct	ed in Rhode Island	
MEDICAL SERVICES			
7. Names and Addresses of t	the Officers and Directors:		
	must be listed. If officers and applicable; please delete.	/or directors have been elected	, the title
Title	Individual Name	Address	ada Countri
PRESIDENT	First, Middle, Last, Suffix WILLIAM J ANDREONI MD	Address, City or Town, State, Zip Co 1524 ATWOOD AVE	NUE
		JOHNSTON, RI 02919 US	5A

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CNP		\$0.0000	800.00	45
or individuals signing this		the affirmation or ac	cknowledgement	of the
or individuals signing this signatory, under penalties act and deed of the corpor electronic filing, in compli	instrument constitutes of perjury, that this in ration, and that the fac ance with R.I. Gen. La OUTSIDE GENERAL	the affirmation or ac strument is that indivi- ts stated herein are th ws § 7-1.2. <u>COUNSEL</u>	cknowledgement idual's act and d	of the eed or the