Office of the Secretary of State

100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

Corporate ID No.	2. Name of Corporation	
17852	Rhode Island Medical Imaging, Inc.	

Street Address Principal Business Office	City	State	Zip

Business Phone No.	5. State of Incorporation	6. SIC Code
	RHODE ISLAND	9217

Brief Description of the Character of Business Conducted in Rhode Island

3. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
reet Address			Street Address		
lty	State	Zip	City	State	Zip
cretary Name			Treasurer Name		
reet Address			Street Address		
lty	State	Zip	City	State	Zip

4. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

irector Name			Director Name		
reet Address			Street Address		
ty	State	Zip	City	State	Zip
irector Name			Director Name		
reet Address			Street Address		

HODE ISLAND AND PROVIDENCE PLANTATIONS
etary of State

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evin, Secretary of State

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