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FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Corporations Division 169 North Main Street Proculence, RI 02903-1535 401-222 3040

Matthew A. Brown, Secretary of State 2005 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_ Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) L. Corporate ID No. 2 Name of Corporation 65682 Sudhir Bansal, M.D., Inc. Street Address Principal Business Office 215 Tollgate Road Suite 309 Warwick 02886 RI 4. Business Phone No. 5 State of Incorporation 6 SIC Code 401-732-6828 9217 RHODE ISLAND Brief Description of the Character of Russians Conducted in Rhode Island TO ENGAGE IN THE PRACTICE OF MEDICINE 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS President Name Sudhir Bansal Sudhir Bansal Street Address Street Address 85 Lynn Circle same as above ZpΕ. Greenwich RI 02818 Treasurer Name Sudhir Bansal Sudhir Bansal Street Address same as above same as above Sate Z(p)City State Zψ 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [ ] FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Sudhir Bansal Street Address Street Address same as above  $Z\psi$ Mate  $Zp_{-1}$ Cur State Street Address Street Address State Z:10 City State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) [] 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Stares Class Series Par Value Number of Shares Class/Series Par Value 100 NO PAR VALUE 100 Common No par This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

Signature of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

401.222.3040

#### 2004 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No 2. Name of Corporation 65682 Sudhir Bansal, M.D., Inc. 3. Street Address Principal Business Office 215 Tollgate Road Suite 309/310 State Warwick RI 02886 4. Business Phone No. 401 - 732 - 6828 5. State of Incorporation 6 SIC Cixle 9217 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE PRACTICE OF MEDICINE 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS President Nappe Sudhir Bansal Vice President Name Sudhir Bansal Sing 5 ddd Sinn Circle Sircel Address Same as Above $\overline{G}_{0}$ . Greenwich State State Zip RI 02818 Treasurer Name Sudhir Bansal Sudhir Bansal Street Address Street Address Same as above Same as above City State Z.p City State Zφ 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Sudhir Bansal Street Address Street Address Same as above City Zip State Zip City Director Name Street Address Street Address City State Zφ City 2 ip State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) **AUTHORIZED SHARES** ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 100 Common No par 100 NO PAR VALUE This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date	thu in
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By11/27510 6213	
FOR SECRETARY OF STATE USE ONLY	

Juder penalty of perjury, I declare and a neluding any accompanying schedules a	
contained herein are true and correct.	il og-Aproy
ignature of Officer	Date
Sudbir Bansal	<del></del>
Print or Type Name of Officer	

trasident Title of Officer



Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

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#### 2003 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

401-222-3040

Filling Period: January 1-March 1 • Filling Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 65682

2. Name of Corporation

Sudhir Bansal, M.D., Inc.

et Address Principal Business Office

Transligate a registered agent changes the agent's business address to another place within the state, the agent may change the address and the address of the registered office of any corporation of which the agent is a registered agent by completing the statement below instead of the preceding form, and submitting same for filing, without fee. Again, it is recommended that you call the Corporations Division prior to submitting the statement to verify that the information required in item 2 below currently appears in the corporate records of the Secretary of State. As required by law, you must provide a street address in item 3 below.

No Filing Fee

ID Number: 65682

#### STATEMENT OF CHANGE OF REGISTERED OFFICE BY THE REGISTERED AGENT

Pursuant to the provisions of Sections 7-1.1-12(d) or 7-1.1-107(d) of the General Laws, 1956, as amended, the undersigned registered agent submits the following statement for the purpose of changing the agent's business address and the address of the registered office of the corporation named herein to another place within the state:

- 1. The name of the corporation is Sudhir Bansal, M.D., Inc.
- 2. The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

600 Reservoir Avenue, Cranston, RI 02910

- 3. The address of the NEW registered office is: 275 Reservoir Avenue, Providence, RI 02907
- 4. The change of address of the registered office shall become effective upon the filing of this statement, or on 04/05/2004

(a date not prior to, nor more than 30 days after, filing this statement)

5. A copy of this Statement has been mailed to the corporation.

Date: 04/05/2004

Name of Registered Agent

e of Registered Agent

FILED

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Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1355 401-222 3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_ 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00



		••			INSTRU
(FORM MUST BE TYPED IN B	LACK)				
1. Corporate ID No	2 Name of Corpora	tion			\ <u></u>
65682	Sudhir Bans	sal, M.D., Inc.			
3 Street Address Principal Busine	ss Office		City	State	Zip
215 Tollgat	e Road Suit	e 309/310	Warwick	RI	02886
4 Business Phone No.		5 State of Incorporatio		* *	6. SIC Code
401-732-682		RHODE ISLAN	ID		9217
7 Brief Description of the Charac	ter of Business Conducted i	n Rhode Island + O On O	age in the practice.		
	ESSES OF THE OFFI	ich a corbora	tion may be for CHMENT). FILLIN SPACE  Vice President Name  Sudhir Bansa	rmed under RIG ES BEFORE USING ATTAC	'T
Sueet Address 85 Lynn Cir	cle		Street Address Same as above		
E. Greenwic	h RI	<sup>Zip</sup> 02818	City	State	Zip
Secretary Name Sughir Bans	al		Treasurer Name Sudhir Bans	sal	
Street Address Same as abo	ve		Street Address Same as abo		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRE Director Name Sudhir Bans		CTORS (*x* box for at	TACHMENT) FILL IN SPACE Director Name	CES BEFORE USING ATTA	ACHMENTS
same as abo	ve		Sticel Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Sticet Address		
City	State	/ip	City	State	Zip
10. SHARES AUTHORIZI AUTHORIZED SHARES	E <b>D</b> ("X" BOX FOR ATTA	CHMENT) ,	11. SHARES ISSUED	- ("X" BOX FOR ATTACHMENT	j ·
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			100	Common	No par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FOR SECRETARY OF STATE USE ONLY

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.

gnature of Officer Date 2/26/6

SUDNIA BOWSAL MO INC

(FORM MUST BE TYPED IN BLACK)

Corporations Division 100 North Main Street, Providence, RI 02903-1335

401-222-3040

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

1 Corporate ID No.	2 Name of Corporation			·	
65682	Sudhir Ba	nsal, M.D.,	Inc.		
3. Street Address Principal Business Of	fice		City	State	Zip
42 Pytham Aveni	ue		Johnston	RI	02319
4. Business Phone No.		5. State of Incorporation			6 MC Code
401 <b>-</b> 233 9277		Rhóde Isla	and		9217
7 Brief Description of the Character of					
To engage in	the practi	ce of medici:	ne.		
8. NAMES AND ADDRESSE	S OF THE OFFICE	R\$ ("X" BOX FOR ATTACH	MENT) FILL IN SPACES BEF	ORE USING ATTACHME	INTS
President Name			Vice President Name		
Sudhir Bansal			Sudhir Bansal		
Street Address	_		Street Address		
85 Lynn Circl			Same		
City	State	Zip OOOOC	City	State	Zip
East Greenwich	RI	02886			
Secretary Name Sudhir Bansal			Treasurer Name		
			Sudhir Bansal		
Suect Address Same			Street Address		
	51.4-	7.a	Same	Stores	7:4
City	State	Ζιρ	City	State	Zip
9. NAMES AND ADDRESSE	S OF THE DIRECT	ORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES BI	EFORE USING ATTACHS	MENTS
Director Name			Director Name		
Sudhir Bans	sal				
Street Address Same			Street Address		
Same					
City	State	Zip	City	State	Zip
Director Name			Director Name		
Frank ( ) I			Cours Addin		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
,			···,		,
10. SHARES AUTHORIZED AUTHORIZED STARES	("X" BOX FOR ATTACH	MENT)	11. SHARES ISSUED (*X* B	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Senes	Par Volue
100 No Par			100	_	
OO NO Far	value		100	Common	No l'ar

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

de Date:	FILED
heck No :	FEB 0 1 2001 114
POR SEGRETA	By WD 7744

Under penalty of perjury, I declare and aftern that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Sudhir Bansal Print or Tope Name of Officer

President

litic of Officer

(FORM MUST BE TYPED IN BLACK)

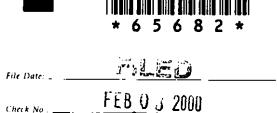
James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

401-222-3040

1. Corporate ID No. **65682** Name of Corporation
Sudhir Bansal, M.D., Inc. 3 Street Address Principal Business Office The Summit Fast-Suite 300, 300 Centerville Rd. Warwick 02886 RI 4. Business Phone No. 5. State of Incorporation 401-737-7200 7. Brief Description of the Character of Business Conducted in Rhode Island to engage in the practice of medicine 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Sudhir Bansal Sudhir Bansal Street Address Street Address 85 Lynn Circle same City State State Zip East Greenwich RΙ 02886 Secretary Name Treasurer Name Sudhir Bansal Sudhir Bansal Street Address Street Address same same City Zip City State Zip 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Sudhir Bansal Street Address Street Address same City State Zip City State Lip Director Name Director Name Street Address Street Address City Mate State  $Z_{10}$ 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 100 NO PAR VALUE 100 Common No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. Signature of Officer

Under penalty of perjury, I declare and affirm that I have examined

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Print	ar	Type	Name	of Officer	
	j	Pre	sid	lent.	

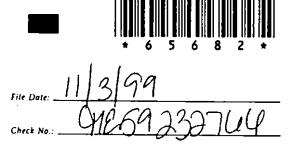
Title of Officer

FOR SECRETARY OF STATE USE ONLY



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filling Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 65682 Sudhir Bansal, M.D., Inc. 3. Street Address Principal Business Office Warwick The Summit East-Suite 330, 300 Centerville Rd., 09886 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-737-7200 **RHODE ISLAND** 9217 7. Bitef Description of the Character of Business Conducted in Rhode Island to engage in the practice of medicine and all lawful purposes for which a corporation may be formed under RI Gen Laws (1956, as amended, Title 7,Ch. 1.1) 8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Sudhir Bansal Sudhir Bansal Street Address Street Address 85 Lynn Circle same as above City State 02818 RI East Greenwhich Secretary Name Treasurer Name Sudhir Bansal Sudhir Bansal Street Address Street Address same as above same as above State Zip City State 210 9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Sudhir Bansal Street Address Street Address same as above City ZIp City State Director Name Director Name Street Address Street Address City State 7,10 City State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSUTED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value **100 SHS NO PAR VALUE** 100 Common No Par This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FOR SECRETARY OF STATE USE ONLY

Signature of Officer Sudhir Bansal Print or Type Name of Officer President Title of Officer

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.



(FORM MUST BE TYPED IN BLACK)

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

401-277-3040

1. Corporate ID No.	2. Name of Carpora	ttion			
65682	Sudhir Ban	sal, M.D., Inc.			
3. Street Address Principal Business C The Summit East- Su	Office		c <sub>lly</sub> Warwick	State RI	zip 02886
4. Business Phone No. 401-737-7200		5. State of Incorporation			6. SIC Code <b>9217</b>
		in Rhode Island to engage	in the practice of medic as amended, Title 7, Ch.		
8. NAMES AND ADDRESS					
President Name			Vice President Name		
Sudhir Bansal			Sudhir Bansal		
Street Address 85 Lynn Circle			Street Address same as above		
City	State	Zip	City	State	Zip
East Greenwich	RI	02818			
Secretory Name Sudhir Bansal	·		Treasurer Name Sudhir Bansal		·
Street Address			Street Address		
same as above			same as above	•	
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESS	ES OF THE DIR	ECTORS ("X" BOX FOR A	TTACHMENT)		
Director Name			Director Name		
Sudhir Bansal Street Address					
same as above			Street Address		
City	State	7/-	0.5		
c.,,	State	Zip	City	State	Zip
Director Name		·	 Director Name	•	
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED AUTHORIZED SHARES	) ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED ("X	BOX FOR ATTACHMEN	T)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 SHS NO PAR VA	LUE		100	Common	No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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File Date: 4UG 0 0 1998  Check No.: 6 3119	TIV :	; :				
By		•				

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.

Signature of More Sudhir Bansal

Print or Type Name of Officer President



James R. Lungevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

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#### PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

The Summit East-Suite 330, 300 Centerville Road

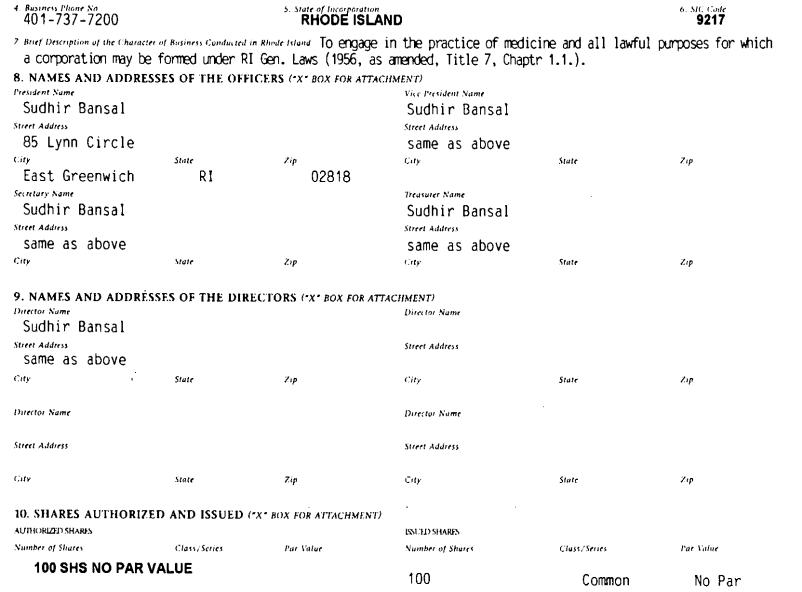
(FORM MUST BE TYPED IN BLACK)

3. Street Address Principal Business Office

1 Corporate ID No. **65682** 

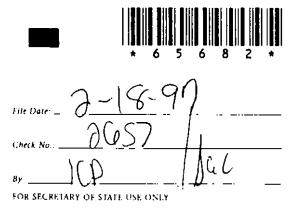
2. Name of Corporation

Sudhir Bansal, M.D., Inc.



Warwick

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

Signature of Officer Date

President

### PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State

Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1 Filing Fee: \$50.00

CORPORATE ID NO.			R PRINT IN BLACK INK.		
	2. NAME OF CORPORATION			<del>-</del> -	
65682	Sudhir	Bansal, M.D.,	Inc.		
street address principal business o The Summit East	OFFICE	· •	ary	STATE	ZIP C00€
300 Centerville			Warwick	RI	02886
JSHIESS PHONE NO.		5 STATE OF INCORPORATION	-	• -	6 SIC CODE
401-737-7200		RHODE I			9217
RIEF DESCRIPTION OF THE CHARACTER O	OF BUSINESS CONDUCTED IN RHODE ISL	wo to engage	in the practice of		- · <del>- · · · · · · · · · · · · · · · · ·</del>
for which a cor	poration may be	formed under	RI Gen. Laws (1956	medicine and a	ill lawful purpos
	8. N A M		RESSES OF THE OF		come in combination
Budhir Bansal			VICE PRESIDENT NAME	110273	
			Sudhir Bansal		
n ADDRESS 85 Lynn Circle			STREET ADDRESS		
	STATE	ZP COOE	same as above		
East Greenwich	RI	02818	aty	STATE	ZIP COOE
ETARY HAME	<del></del>		TREASURER NAME	<del></del>	
Sudhir Bansal					
ET ADORESS	<del></del>	·	Sudhir_Bansal_ street ADDRESS	<del></del>	<del></del>
same as above			same as above		
	STATE	ZP C006	CIY	STATE	
ET ADDRESS			STREET ADDRESS		·
same as above					
same as above	STATE	ZIP CODE	ary	STATE	ZP 000E
	STATE	ZIP CODÉ	ату	STATE	ZP 000€
	STATE	ZIP CODÉ	DIRECTOR NAME	STATE	ZP 000€
STOR NAME	STATE	ZIP CODE		STATE	24° C000€
CTOR NAME	STATE	ZIP CODÉ	DIRECTOR NAME	STATE	ZIP COOE
STOR NAME	STATE	ZIP CODE	DIRECTOR NAME	STATE	7P COSE
CTOR NAME			DIRECTOR HAME  STREET ADDRESS		
STOR NAME	STATE 1 0 . S H		DIRECTOR NAME  STREET ADDRESS  OTV		
TOR NAME	1 0 . S H	A R E S A U T H O R	STREET ADDRESS OTV	STATE  ISSUED SMARES	7P C09E
CTOR NAME	STATE 1 0 . S H	in table	DIRECTOR HAME  STREET ADDRESS  OTY	State	
TOR NAME  IT ADDRESS  IMPRIESS  IMPRIESS	1 0 . S H	A R E S A U T H O R	STREET ADDRESS  CITY  A N D I S S U E D  MUMBER OF SHARES	ISSUED SHARES QASS/SERIES	7P COOE  PAR VALUE
TOR NAME  T ADDRESS  MANAGER OF SHARES	1 0 . S H AUTHORIZED SHARES CLASS/SERES	A R E S A U T H O R	STREET ADDRESS OTV	STATE  ISSUED SMARES	7P C09E
TOR NAME  T ADDRESS  MANAGER OF SHARES	1 0 . S H AUTHORIZED SHARES CLASS/SERES	A R E S A U T H O R	STREET ADDRESS  CITY  A N D I S S U E D  MUMBER OF SHARES	ISSUED SHARES QASS/SERIES	7P COOE  PAR VALUE
ET ADDRESS  IAMABER OF SHARES	1 0 . S H AUTHORIZED SHARES CLASS/SERES	A R E S A U T H O R	STREET ADDRESS  CITY  A N D I S S U E D  MUMBER OF SHARES	ISSUED SHARES QASS/SERIES	7P COOE  PAR VALUE
ET ADDRESS  NAMBER OF SHARES	1 0 . S H AUTHORIZED SHARES CLASS/SERES	A R E S A U T H O R	STREET ADDRESS  CITY  A N D I S S U E D  MUMBER OF SHARES	ISSUED SHARES QASS/SERIES	7P COOE  PAR VALUE
ET ADDRESS  NAMBER OF SHARES  100 SHS NO	1 0 . S H AUTHORIZED SHARES CLASS/SERES PAR VALUE	A R E S A U T H D R PARVALUE	STREET ADDRESS  OTY  A N D I S S U E D  MUMBER OF STARES  100  GNED IN INK by either th	ISSUED SHARES CLASS/SERIES CONTETION	PARVALUE NO Par
ET ADDRESS  NAMBER OF SHARES  100 SHS NO	1 0 . S H AUTHORIZED SHARES CLASS/SERES PAR VALUE	A R E S A U T H D R PARVALUE	STREET ADDRESS  CITY  A N D I S S U E D  MUMBER OF SHARES	ISSUED SHARES CLASS/SERIES CONTETION	PARVALUE NO Par

Signature of Officer

Prosident

Title of Officer

Sudhir Bansal

Print or Type Name of Officer

For Secretary of State Use Only

File Date:

Check No:

By:

6/18/96 2457 STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
100 North Main Street

#### ANNUAL REPORT

Filed Annually - Jan 1-March 1 Filing Fee \$50.00 Take Checks Payable to: Secretary of State

Providence, Rhode Island 02903	Make Checks Payable to: Secretary of State
Corporate ID 0065682 Bansa	Annual Report for the year 1995
Name of Corporation: SUDHIR BANSL, M	.D., INC
Business entity organized under the laws of the State of: RI	Business Entity is (check one): [ X] Business Corporation (See RIGL Chapter 7-1.1). [ ] Professional Service Corporation (See RIGL
For foreign entity, address & telephone # of principal office: N/A	Chapter 7-5.1)
	Brief Statement of the character of business conducted in Rhode Island is to engage in the practice of medicine and all
Phone ( )	lawful purposes for which a corporation may be
Address and telephone number of office of business entity in Rhode Island	formed under the R.I. General Laws (1956, as amended
	Title 7, Ch. 1.1)
The Summit East-Suite 330, 300	
Centerville Rd., Warwick, R.I.02886	
Phone: (401) 737-7200	
THE NA Stree	MES OF THE OFFICERS ARE: t Address City/State Zip Code
President: Sudhir Bansal 85 Ly	<del>-</del>
	as Above
<b>a</b>	as Above
_	as_Above
	ES OF THE DIRECTORS ARE:
Name Street Addre	ess City/State Zip Code
Sudhir Bansal 85 Lynn Circ	le East Greenwich, R.I. 02818
NUMBER OF SHARES AUTHORIZED (Rider may be attached) Number of Shares Class/Series	NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider May be attached) Number of Shares Class/Series
100 Common	100
. = [	O Manon
DATE LENT 14, 19 95	SUDHIR BANSAL, M.D., INC.
SEP 15	By: 11
50.6	Sudhir Bansal The nide I
	Print or type Name of Officer Signing
B(	Print or type Name of Officer Signing PRESIDENT

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS
PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect,
Form 9 must be filed.

### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Corporations Division 100 North Main Street Providence, Rhode Island 02903

Corporate ID <u>0065682</u>	_		Annual Repor	t for the year 1994
Name of Business Entit	y: <u>SUDHIR B</u>	ANSAL, H.D., J	INC.	
Business entity organi	zed under t	he laws of the	State of Rh	ode <u>leland</u> .
Federal Taxpayer Ident	ification N	umber:		_
Business Entity is (ch	eck one):			
<pre>[X] Business Cor [ ] Professional [ ] Limited Liab</pre>	Service Co	rporation (See	RIGL Chapte	r 7-5.1)
Date of Organization:_	August 13.	1991		
Date of Qualification	to do busin	ess in Rhode 1	sland (if fo	reign entity): N/A
Brief statement of the in the practice of med be formed under the R.	<u>icine and al</u>	<u>ll lawful purp</u>	oses for whic	ch a corporation may
For foreign entity, ad	dress and t	elephone numbe	er of princip	al office: N/A
Business address and to in Rhode Island <u>The Sy</u> <u>02886 (401) 737-7200</u>				
Name, title, and mailim directed: <u>Thomas A. Ta</u>			on to whom co	ommunications may be
	THE NAMES	OF THE DIRECT	ORS ARE:	
Name	Office			ss (including r, street, zip code)
Sudhir Bansal	Director	85 Lynn Circ	le, East Gre	enwich, RI 02818
	Director			
	Director			
	THE NAMES	OF THE OFFICE	ERS ARE:	
Sudhir Bansal	President	Same as above	2	<u>.</u>
Sudhir Bannal	Vice Presi	dent <u>Same as</u>	above	
Sudhir Baneal	Secretary	Same as above	<u> </u>	
Sudhir Bansal	Treasurer	Same as above	В	
Number of shares autho	rized:			Par Value or statement that
No. of shares	Class	Series		shares are without par value
100	Common			No Par
Number of Shares issue	ed and outst	anding:		Par Value
No. of shares	Class	Series		or statement that shares are without par value
100	Common			No Par
DATED 3 3	, 19 <u>9</u> 4		SUDHIR BANS Name of Cor By	me

(Report must be signed by an officer)

**FILED** 

MAR 3 1 1994

By (CL 75)

To be filed annually between January 1st and March 1st

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Corporations Division 100 North Main Street Providence, Rhode Island 02903

Corporate ID 00656	582	Annual Report for t	he year <u>1993</u>
FIRST: The na	ame of the corporati	ion is <u>ŞUDHIR BANSAL, M.D</u>	., INC
SECOND: It is	incorporated under	r the laws of <u>Rhode Isl</u>	and
		briefly stated, is to	
The Market Control No. 1	(· denetal Pawa (195	56, as amended Title 7, Cl address of its principal	hapter 1.1).
FIFTH: Busine Centerville Road, Wa	ss address in Rhode Irwick, Rhode Island	Island <u>The Summit East -</u> 1 02886.	Suite 330, 300
	and address of its	directors and officers: rider if necessary)	
Name	Office	Address (: number, st	including reet, zip code)
Sudhir Bansal	_ Director	85 Lynn Circle, East Green	nwich, RI 02818
	Director		<del></del>
	Director		
Sudhir Bansal	President	Same As Above	
Sudhir Bansal	Vice President	17 H H	
Sudhir Bansal	Secretary		
Sudhir Bansal	Treasurer	н н	
SEVENTH: Numb	er of shares author		Par Value statement that
No. of shares	Class Se.		es are without par value
100	Common		No Par
	r of Shares issued:	APR 28 isospr s	Par Value tatement that es are without
No. of shares	Class Ser.	ies	par value
100	Common	SECY OF STATE	No Par
DATED 2 2	, 19 <u>93</u>	SUDHIR BANSAL, Name of Corporat	M.D., INC.
		Title President	
(Report must be sig	ned by an officer)		

# Jar Jar State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

1159 R.D.

Corporate ID		Annual Report for the	year <u>1992</u>
FIRST: The nan	ne of the corporation is	Budhir Sansal. M	.a., i.n.
SECOND: It is in	scorporated under the laws	of Rhode Island	
		d, is to engage in the practi	
other I	awful purposes.		
FOURTH: If fore	ign corporation, address of	its principal office	
	address in Rhode Island	The Summit East - Suite 330	, 300 Centerville Road
SIXTH: Names a	nd addresses of its directors	s and officers: (Attach rider if necessary)  Fice Address (including number, street, zip code)	
Sudhir Bansal,	M.D. Directo		
	Directo	or .	
	Directo	or	
Sudhir Bansal,	M.D. Preside	nt Same as above	
Sudhir Bansal, I	M.D. Vice Pr	u u u resident	
Sudhir Bansal, I	1.D. Secreta	11 H H	
Sudhir Bansal, I	M.D. Treasur	er	
SEVENTH: Numb	er of Shares authorized:		Par Value
No. of Shares	Class	Series	or statement that shares are without par value
100	Common	PAID	No Par
Eighth: Number of Shares issued:		APR ng 1892	Par Value
No. of Shares	Class	SIRGIY OF STATE	or statement that shares are without par value
100	Common		No Par
Dated	4/6 19 92	Sudhir Bansal, M.D., Inc (Name of Corporation)	.•
		By Z	0
(Report must b	e signed by an officer)	Title	

## MINUTES OF JOINT ACTIONS OF SHAREHOLDERS AND DIRECTORS OF SUDHIR BANSAL, M.D., INC. TAKEN AS OF JANUARY 2, 1992 BY UNANIMOUS CONSENT IN LIEU OF SPECIAL MEETING

The undersigned, being all of the Shareholders and all of the Directors of Sudhir Bansal, M.D., Inc. a Rhode Island Corporation, (the "Corporation") does hereby unanimously consent to the adoption of, and do hereby confirm, approve, adopt, and ratify the actions set forth in this document ("Unanimous Consent") pursuant to Rhode Island General Laws, Section 7-1.1-30.3 and Section 7-1.1-39.1. The within actions by unanimous written consent are taken in lieu of a Special Meeting of Shareholders and Special Meeting of the Board of Directors of the Corporation. This Unanimous Consent shall be dated and shall be effective as of the date first above written.

The following resolutions are hereby unanimously adopted by the Shareholders and Directors:

RESOLVED, that the following persons are hereby elected to hold offices of the corporation opposite their respective names below until such time as their respective successors have been elected and qualified:

President: Sudhir Bansal, M.D.

Vice President: Sudhir Bansal, M.D.

Treasurer: Sudhir Bansal, M.D.

Secretary: Sudhir Bansal, M.D.

RESOLVED, that Sudhir Bansal, M.D., is elected to be the Director of the Corporation.

FURTHER RESOLVED, that all the activities for and on behalf of

the corporation by its respective corporate officers and/or directors are hereby ratified and confirmed.

IN WITNESS WHEREOF, each of the undersigned has executed this Unanimous Consent, effective as of the date first above written. This Unanimous Consent may be executed in counterparts, each of which shall be deemed original.

"SHAREHOLDERS"

Sudhir Bansal, M.D.

"DIRECTORS"

Sudhir Bansal, M.D.