

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Form 630 12/01

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1	March 1 • Filin	g Fee: \$50.00	ORI FOR THE TE	AR	
(FORM MUST BE TYPED IN E	2. Name of Corporation				
99985		Associates of New I	England B.C. Inc		
3. Street Address Principal Busin	nes Office	1330GBTES OF IVEW			
1775 BALD HILL RO		E PLAZA	City WARWICK '	State RI	Zip
4. Business Phone No.		5. State of Incorporation			102886-
4018221866		RHODE ISLAN			6. SIC Code 9233
7. Brief Description of the Chare	acter of Business Conduct	ed in Rhode Island	· · · · · · · · · · · · · · · · · · ·		
TO CONDUCT A DENTAL	PRACTICE.				
8. NAMES AND ADDRESS	SES OF THE OFFICE	ERS ("X" BOX FOR AT	TACHMENT) FILL IN SPACES	REFORE USING ATTA	CHMENTS
1 resident Name		The office of the Employees and a constraint	Vice President Name	121.2.12.12.12.11.11.11	C. D. S. C.
Isam F. Hamati			• None		_
Coral Ridge Plaza,	1775 Bald Wi	ll Bond	Street Address		
City	State		· .		
Warwick	RI	<i>Zip</i> 02886	City	State	Zip
Secretary Name	1	102000	Treasurer Name	. l	
Isam F. Hamati			Isam F. Hamati		
Street Address			* Street Address		
Coral Ridge Plaza,	1775 Bald Hi	ll Road	.Coral Ridge Plaza,	1775 Bald Hill	Road
City	State	Zip	City	State	Zip
Warwick	RI	02886	. Warwick	RI	02886
9. NAMES AND ADDRESS	ES OF THE DIREC	TORS ("X" BOX FOR	ATTACHMENT) FILL IN SPAC	ES BEFORE USING ATT	ACHMENTS
Director Name			Director Name		
Isam F. Hamati			•		
Street Address 5		_	· Street Address		
Coral Ridge Plaza,			<u>:</u>		
City Warwick =	State	Zip	·City	State	Zip
Director Name	JRI	02886		RI	02886
Sirector realine			* Director Name		
Street Address	 -		· Sircei Address		
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Cibi	State	Zip	City	State	Zip
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10. SHARES AUTHORIZE	D ("X" BOX FOR ATT.	ACHMENT)	11. SHARES ISSUED ("X" BOX	FOR ATTACHMENT	1
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 \$.01 PAR VALUE			100	Common	\$.01
	 -	 	100	COMMON	3.01
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i nis report must de signed	t in ink by either th	ie President, Vice P	resident, Secretary, Assistant	Secretary, Treasurer,	Receiver or Trustee
18 19110 1811 0 18101					
9 9 9	8 5		Under penalty of perjury, I	declare and affirm that	have examined
			this report, including any a	ccompanying schedules	and statements
99985 DBC, 04/07/05 1	0:48:20 AM]	and hat all statements con	tained herein are true an	d correct.
	7-05		1/2 1/.	1 ,	_
File Date U 1 C			Hora Hau	NVT. 6-	15.05
Check No. 2477			Signature of Officed	Date	
		1	Isam F. Hamati		
Ву:	<u>a</u>	_	Print or Type Name of Officer		
FOR SECRETARY OF STATE 1	JSE ONLY		President		

Title of Officer



Manhew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401.222.3040

Form 630 12/01

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

FORM MUST BE TYPED 1. Corporate ID No.	2. Name of Co.	rporation			
99985	Aspen De	ntal Associates of No	ew England, P.C., Inc.		
3. Street Address Principal	Business Office		Cirv		
1775 BALD HILL	ROAD CORAL F	IDGE PLAZA	WARWICK	State	Zip
4. Business Phone No.		5. State of Incorpo	Pration	RI	02886-
(401)822-1866		RHODE ISL			6. SIC Code
7. Brief Description of the C	haracter of Business (onducted in Rhode Island			9233
TO CONDUCT A DENT	AL PRACTICE.	The state of the s			
8. NAMES AND ADDR	ESSES OF THE O	REICEDS MYT BOY TO			
resident Name		TICERS I A BOX FO	RATIACHMENT) FILL IN	SPACES BEFORE USING	ATTACHMENTS
Runjan Seth, D.I	M.D.		· NONE		,_
Street Address			Street Address		·
Coral Ridge Pla		l Hill Road	•		
City	State	Zip	City	State	
Warwick	RI	02886	• •	अवाष्ट	Zip
ecretary Name		, <i></i>	Treasurer Name		l
Runjan Seth, D.M	I.D.		Runjan Seth, D).M.D.	
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Coral Ridge Plaz	a, 1775 Bald	Hill Road	.Coral Ridge Pl	aza, 1775 Bald F	Hill name
lity	State	Zip	`City	State	·····
Varwick	RI	02886	Warwick	1	Zip
9. NAMES AND ADDRI	esses of the di	RECTORS ("X" BOX F	ORATTACHMENT) FILL IN	SPACES REFORM HELL	1 UZ886
			Director Name	or vers per olds 03140	WITHCHWENTS
Runjan Seth, D.M	.D.		•		
reet Address			Street Address	····	
Coral Ridge Plaz		Hill Road	•		
iny In rusi ele	State	Zip	•City	State	Zip
Warwick	RI	02886	•		Z.ip
Director Name			Director Name		<i></i>
			•		
ireei Address			*Street Address		
ity	State				
,	Sale	Zip	City	State	Zip
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umber of Shares	Class/Scries	Da- 1/-1	ISSUED SHARES		
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· · · · · · · · · · · · · · · · · · ·				Common	\$.01 par
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is report must be sign	iea in ink by eith	er the President, Vice	President, Secretary, Assi.	stant Secretary, Treasi	irer. Receiver or Tru
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18 18XX 18X0 18	IDI IDIBI DII				
999	101 10(0) 3 8 5				
. ,			Under penalty of per	jury, I declare and affirm (hat I have examined
0000E DDC 04/00/0	40.45.45.44		this report, including	any accompanying sched	ules and statements.
99985 DBC 01/09/04	10:45:10 AM*		and that all statemen	ts contained herein are tru	e and correct.
ile Date	<u></u>	_	VIIIA.	7	10/01
			Signature of Officer	<u>:Y1</u>	(10) 04
		1	0 - J / D		rate
ieck No 1 1 - 200	} 	_	Runian Sath	, D M D	
MAR 11-200	}	-	Runjan Seth	1, D.M.D.	
MAR 11-200	} 	-	Runjan Seth Print or Type Name of President	n, D.M.D. Officer	-

President Title of Officer

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903 1335 401-222-3040

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PELASE	READ
IASTRUI	HUXX

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1-March 1 • Filing Fee: \$50.00 -(FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 99985 Aspen Dental Associates of New England, P.C., Inc. Street Address Principal Business Office State RI Coral Ridge Plaza, 1775 Bald Hill Road 6. SIC Code (401) 822-1866 RHODE ISLAND 9233 7 Brief Description of the Character of Business Conducted in Rhode Island Conduct dental practice 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Runjan Seth D.M.D. Street Address Street Address Coral Ridge Plaza, 1775 Bald Hill Road State City State Zip Warwick RI 02886 Secretary Name Treasurer Name Runjan Seth D.M.D. Runjan Seth D.M.D. Street Address Street Address Coral Ridge Plaza, 1775 Bald Hill Road Coral Ridge Plaza, 1775 Bald Hill Road Warwick Warwick State RI RI 02886 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Runjan Seth D.M.D. Street Address Street Address Coral Ridge Plaza, 1775 Bald Hill Road State Zip Warwick RI 02886 Director Name Director Name Street Address Street Address City State City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

8,000 \$.01 PAR VALUE

Number of Shares

Class/Series

Par Value

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

\$.01 Par Value

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

	* 9 9 9 8 5 *
File Date:	3.3.03
Check No.: _	2916
By	ARY OF STATE USE ONLY

Under penalty of perjury, I declare and	d affirm that I have examined
this report, including an accompanyi	
that all statements contained herein a	re true and correct.
(Wha H-	- 2/28/03
Signature of Officer	Date
Runjan Seth D.M.D.	
Print or Type Name of Officer	

President			
Title of Officer	 	Farm 630	12/0.

2003 annul

ASPEN DENTAL ASSOCIATES OF NEW ENGLAND, P.C., INC.

SOLE SHAREHOLDER'S ACTION BY WRITTEN CONSENT IN LIEU OF 2002 ANNUAL MEETING

Pursuant to the authority of Section 7-1.1-30.3 of the Rhode Island Business Corporation Act, the undersigned, being the sole shareholder of Aspen Dental Associates of New England, P.C., Inc., a Rhode Island professional corporation (the "Corporation"), hereby consents to adoption of the following resolutions for and on behalf of the Corporation:

WHEREAS, the sole shareholder of the Corporation has reviewed with the sole Director of the Corporation the acts and proceedings of the Directors since the date of the last annual meeting of sole shareholder or sole shareholder's action in lieu thereof.

NOW THEREFORE BE IT:

That the acts and proceedings of the sole Director of the Corporation from the date RESOLVED: of the last annual meeting of the sole shareholder or sole shareholder's action in lieu thereof through the date hereof as reflected in the minutes of the Corporation

and as reviewed with such sole Director be, and the same hereby are, ratified; and

it is further

That the number of directors to serve as the Board of Directors of the Corporation RESOLVED: is hereby set at one, and that the following person be, and hereby is, elected to serve as the sole Director of the Corporation until the next annual meeting of the sole shareholder or sole shareholder's action in lieu thereof, and until his

successor is duly elected and qualified:

Runjan Seth, D.M.D.

IN WITNESS WHEREOF, the undersigned has executed this Consent as of the day of February, 2003.

Runjan Seth, D.M.D.

ASPEN DENTAL ASSOCIATES OF NEW ENGLAND, P.C., INC.

DIRECTOR'S ACTION BY WRITTEN CONSENT IN LIEU OF 2002 ANNUAL MEETING

Pursuant to the authority of Section 7-1.1-39.1 of the Rhode Island Business Corporation Act, the undersigned, being the sole member of the Board of Directors of Aspen Dental Associates of New England, P.C., Inc., a Rhode Island professional corporation (the "Corporation"), hereby consents to the adoption of the following resolutions for and on behalf of the Corporation:

WHEREAS, the Sole Director of the Corporation is familiar with the books and records of the Corporation and has reviewed with the officers of the Corporation the acts and proceedings of the officers since the date of the last annual meeting of the Sole Director's action in lieu thereof.

NOW THEREFORE BE IT:

RESOLVED: That the acts and proceedings of the officers of the Corporation from the date of the last annual meeting of the Sole Director or Sole Director's action in lieu thereof through the date hereof as reflected in the books and records of the Corporation and as reviewed with such officers be, and the same hereby are, ratified, confirmed and approved as the duly authorized acts of the Corporation; and it is further

RESOLVED: That the following person be, and hereby is, elected to serve as an officer of the Corporation, to serve at the pleasure of the Sole Director in the capacities indicated below, until the next annual meeting of the Sole Director or Sole Director's action in lieu thereof, and until his successor is duly elected and qualified:

> President and Secretary Treasurer

Runjan Seth, D.M.D. Runjan Seth, D.M.D.

IN WITNESS WHEREOF, the undersigned has executed this Consent as of the day of February, 2003.

Ruman Seth, D.M.D.



Edward S. Inman, 111, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

2002

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

STOP PIJASI RIAD INSTRUCTIONS

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 99985 Aspen Dental Associates of New England, P.C., Inc. State RI 3. Street Address Principal Business Office warwick 02886 Coral Ridge Plaza, 1775 Bald Hill Road 5. State of Incorporation Rhode Island (401) 822-1866 7. Bilef Description of the Character of Business Conducted in Rhode Island Conduct dental practice. 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name None Runjan Seth D.M.D. Street Address Street Address Coral Ridge Plaza, 1775 Bald Hill Road State City State Zip Warwick RI 02886 Secretary Name Treusurer Name Runjan Seth D.M.D. Runjan Seth D.M.D. Street Address Street Address Coral Ridge Plaza, 1775 Bald Hill Road Coral Ridge Plaza, 1775 Bald Hill Road City Clly RI 02886 Warwick 02886 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Runjan Seth D.M.D. Director Name Sirci Addi Ridge Plaza, 1775 Bald Hill Road Street Address Warwick ^{zip}02886 City State Zip Director Name Director Name Street Address Street Address State Zip Clly State ZIp 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED STARES **ISSUED SHARES** Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 8,000 SHS \$.01 Par Value 100 Common \$.01

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

2-7-12
File Date:
Check No.: 2137
BY: AMF
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I lectare and affirm that I have examined this report, including any accompanying/schedules and statements, and that ill statements contained terein are true and correct.

Runjan Seth D.M.D.

Print or Type Name of Officer
President

Title of Officer

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

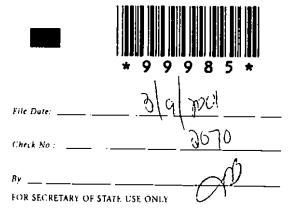
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 99985 Aspen Dental Associates of New England, P.C., Inc. R. Street Address Principal Business Office Coral Ridge Plaza, 1775 Bald Hill Road Warwick 02886 1401-822-1866 5. State of Incorporation . SIC Code 9233 RHODE ISLAND 7 Brief Description of the Character of Business Conducted in Rhode Island Conduct dental practice. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Runjan Seth, D.M.D. Vice President Name None Street Address Street Address Coral Ridge Plaza, 1775 Bald Hill Road City City State Zip Warwick RI 2886 Secretary Name Treasurer Name Runjan Seth, D.M.D. Runjan Seth, D.M.D. Street Address Street Address Coral Ridge Plaza, 1775 Bald Hill Road Coral Ridge Plaza, 1775 Bald Hill Road City Warwick Warwick 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Runjan Seth, D.M.D. Street Address Coral Ridge Plaza, 1775 Bald Hill Road State · City State Zip Warwick RI 2886 Director Name Director Name Street Address Street Address City State 210 City Zip 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Par Value Number of Shares Class/Series Par Value 8,000 \$.01 PAR VALUE 100 Common \$.01

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

Title of Office



Under penalty of perjugy, I declare and	f affirm that I have examined
this report, including any accompanyi	ng schedules and statements, an
that all statements countined herein as	re true and correct.
There of the same	350
Signature of Officer	Date
Runjan Seth, D.M.D.	
Print or Type Name of Officer	
President	



1. Corporate ID No.

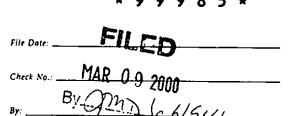
James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

2. Name of Corporation

77702	Aspen D	ental Associate	s of New England, P	.C., Inc.	
3. Street Address Principal Business (1775 Bald Hill Road			chy Warwick	State RI	^{zip} 02886
4. Business Phone No.		S. State of Incorpo	ration		6. SIC Code
		RHODE IS	LAND		9233
7. Brief Description of the Character of Dental practice	of Business Conduc				
8. NAMES AND ADDRESS	ES OF THE O	FFICERS ("X" BOX FOR	ATTACHMENT) · FILL IN SPAC	ES BEFORE USING ATT/	ACHMENTS
President Name			Vice President Name		
Runjan Seth					
itreet Address			Street Address		
1775 Bald Hill Road					
City	State	Zip	City	State	Zip
Warwick Secretary Name	RI	02886	Treasurer Name		
Runjan Seth			Runjan Seth		
1775 Bald Hill Road			1775 Bald Hill R	Pond	
City	State	Zip	Clty	State	Zip
Warwick	RI	02886	Warwick	RI	02886
. NAMES AND ADDRESS	ES OF THE D	· ·		CES BEFORE USING AT	
Olrector Jame			Director Name		
Runjan Seth					
treet Address		·	Street Address		
1775 Bald Hill Road					
lity	State	Zip	City	State	Zip
Warwick	RI	02886			
Director Name		•	Director Name	• • •••	
treet Address			Street Address		
City	State	Zip	City	State	Zip
0. SHARES AUTHORIZED	(*X* BOX FOR .	ATT'ACHMENT)	11. SHARES ISSUED) ("X" BOX FOR ATTACHME	NT)
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lumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
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			100	Common	\$.01 Par Value
h.l	• • • • •				
nis report must be signe	d in ink by e	either the President, '	Vice President, Secretary, A	ssistant Secretary, Trea	surer, Receiver or Trus



FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury T declare and affirm that I have examined this report, including an accompanying schedules and statements, and that all statements contained herein are true and correct. Runjan Seth Print or Type Name of Officer President



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, R1 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

STOP
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INSTRUCTIONS

Filing Period: January	1-March 1 • F	iling Fee: \$50.00			PLEASE RE INSTRUCTIO
(FORM MUST BE TYPED IN BLAC	CK)				
1. Corporate ID No. DADA QL	2. Name of Corporation	•			. \
0 000111 5 179 80	Aspen Den	tal Associate	s of New England	, P.C., Inc.	
3. Street Address Principal Business (124 Northern L	Iffice .		City	State	Zip
4. Business Phone No.	ignes brive		Syracuse	NY	13212
(315) 455-2411		5. State of Incorporation Rhode Is1	and		6. SIC Code
7. Brief Description of the Character	of Business Conducted in R		and		9233
Dental Office	-,				
8. NAMES AND ADDRESS President Name Runjan Seth	ES OF THE OFFICE	ERS (*x* box for attaci	HMENT) FILL IN SPACES BE Vice President Name None	FORE USING ATTACHM	IENTS
Street Address 35 Northhampton	n Avenue		Street Address		
^{City} Boston	State MA	02118	, City	State	Zip
Secretary Name Runjan Seth			neasurer Name Runjan Seth	•	•••
Street Address 35 Northhamptor	n Avenue		Street Address 35 Northhampte	on Avenue	
Boston	State MA	02118	. City Poston	State MA	Zip 02118
9. NAMES AND ADDRESS Director Name	ES OF THE DIRECT	FORS (*X* BOX FOR ATTA	ACHMENT) FILL IN SPACES B Director Name	BEFORE USING ATTACE	
Runjan Seth			None Street Address		
35 Northhampton	n Avenue				
City	State	Zip	City	State	Zip
Boston	MA	02118			
Director Name None			Director Name		
iteet Address			None		
			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED	("X" BOX FOR ATTACH	(MENT)	11. SHARES ISSUED (*X* I	BOX FOR ATTACHMENT)	
iumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Pat Value
8,000	Common	.01	100	Common	.01

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

File Date:	May 1,99
Check No.:	1908
By:FOR SECRETARY O	F 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 tiple and correct.

Runjan Seth

President

Title of Officer

Signature of Officer

L.

Date