	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Busines 148 W. River S		
HOPE	Providence RI 029 (401) 222-30		
Professional Corporation Annual Report Filing Period: January 1 - March			
In accordance with R.I.G.L. 7-1.2 annual report within thirty (30) da (c&d)) is subject to a penalty fee	ys after the time prescribed by		
ANNUAL REPORT YEAR: 202	<u>1</u>		
1. Corporate ID No. 0016	59164		
2. Name of Corporation Jona	athan B. Vane DMD PC		
3. Street Address Principal Bu	usiness Office:		
No. and Street:38 STACity or Town:WARR	<u>TE STREET</u> EN State: <u>R</u>	<u>I</u> Zip: <u>02885</u> Cou	ntry: <u>USA</u>
4. Business Phone No.			
4012456131			
5. State of Incorporation			
State:			
Enter the six digit NAICS Code the list of codes here. More info			ntity. Download
<u>621210</u>			
6. Brief Description of the Cha	aracter of Business Conducte	ed in Rhode Island	
DENTAL PRACTICE			
7. Names and Addresses of the	ne Officers and Directors:		
All officers and directors n Incorporator is no longer a	nust be listed. If officers and/ applicable; please delete.	or directors have been elec	ted, the title
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Z	ip Code, Country
PRESIDENT	JONATHAN B. VANE	41 MIDDLE AV TIVERTON, RI 0287	-

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>
STK		\$0.0100	100.00	100
signatory, under penalties act and deed of the corpor electronic filing, in compli By <u>JONATHAN VANE</u>	ration, and that the fac ance with R.I. Gen. La	rts stated herein are ti ws § 7-1.2.		
Signature of Authorized	1			