



State of Rhode Island  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Foreign Business Corporation  
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2021

1. Corporate ID No. 001340370

2. Name of Corporation Intelligent Medical Objects, Inc.

3. Street Address Principal Business Office:

No. and Street: 9600 W. BRYN MAWR AVENUE, SUITE 100  
City or Town: ROSEMONT

State: IL Zip: 60018 Country: USA

4. Business Phone No.

5. State of Incorporation

State: DE

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

511130

6. Brief Description of the Character of Business Conducted in Rhode Island

THE TRANSACTION OF ANY LAWFUL BUSINESS FOR WHICH THE CORPORATION MAY BE ORGANIZED UNDER THE CORPORATION LAWS OF THE STATE.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

CEO	ANNE BARNES	9600 W. BRYN MAWR AVENUE, SUITE 100 ROSEMONT, IL 60018 USA
SECRETARY	CHARLOTTE TART	9600 W. BRYN MAWR AVENUE, SUITE 100 ROSEMONT, IL 60018 USA
DIRECTOR	ANNE BARNES	9600 W. BRYN MAWR AVENUE, SUITE 100 ROSEMONT, IL 60018 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$0.0100	1,000.00	1000

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 28 Day of February, 2021 at 11:48:37 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By CHARLOTTE TART  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

© 2007 - 2021 State of Rhode Island  
All Rights Reserved