



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year: 2021**  
**Corporation**

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1

APR 09 2021  
 BY 14325 ✓

1 Entity ID Number <b>000068366</b>		2 Exact name of the Corporation <b>DR. ROBERT A. L'EUROPA, LTD.</b>												
3 Principal Office Address <b>1528 Cranston Street</b>			City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>									
4 NAICS Code <b>621391</b>		6 Brief description of the character of business conducted in Rhode Island <b>Practice of chiropractic medicine and physical therapy</b>												
5 State of Incorporation <b>Rhode Island</b>														
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
President Name <b>Robert A. L'Europa, D.C.</b>			Vice-President Name <b>Robert A. L'Europa, D.C.</b>											
Street Address <b>1528 Cranston Street</b>			Street Address <b>1528 Cranston Street</b>											
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>									
Secretary Name <b>Robert A. L'Europa, D.C.</b>			Treasurer Name <b>Robert A. L'Europa, D.C.</b>											
Street Address <b>1528 Cranston Street</b>			Street Address <b>1528 Cranston Street</b>											
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>									
8 List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
Director Name <b>Robert A. L'Europa, D.C.</b>			Director Name											
Street Address <b>1528 Cranston Street</b>			Street Address											
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
This information is currently of record in the Department of State.  Changes require an additional filing.			<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NUMBER OF SHARES</th> <th style="text-align: center;">CLASS/SES</th> <th style="text-align: center;">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">100.00</td> <td style="text-align: center;">CNP</td> <td style="text-align: center;">\$0.0000</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SES	PAR VALUE	100.00	CNP	\$0.0000			
			NUMBER OF SHARES	CLASS/SES	PAR VALUE									
100.00	CNP	\$0.0000												
11 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. <i>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.</i>														
Name of Authorized Representative <b>Dr. Robert A. L'Europa</b>				Date <b>4/5/2021</b>										
Signature of Authorized Representative 														

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov