



State of Rhode Island
Department of State - Business Services Division

FILED

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Annual Report for the year: 2021
Limited Liability Company

OC 28 2021

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- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 1673715	2. Exact name of the Limited Liability Company Imaging RI, LLC			
3. NAICS Code 999999	4. Brief description of the character of business conducted in Rhode Island To hold equipment for the practice, Brain and Spine Neurosurgical Institute			
5. State of Formation Rhode Island				
6. Principal Office Address 1526 Atwood Avenue, Ste. 200		City Johnston	State RI	Zip 02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Sumit Kumar Das, M.D.		Contact Title Member		
Street Address 1526 Atwood Avenue, Ste. 200		City Johnston	State RI	Zip 02919
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS				
Manager Name		Manager Name		
Street Address		Street Address		
City	State	Zip	City	State Zip
Manager Name		Manager Name		
Street Address		Street Address		
City	State	Zip	City	State Zip
Check the box to indicate an attachment <input type="checkbox"/>				
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
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.				
Name of Authorized Person Sumit Kumar Das, M.D.			Date 10/20/2021	
Signature of Authorized Person 				

MAIL TO:
 Division of Business Services
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