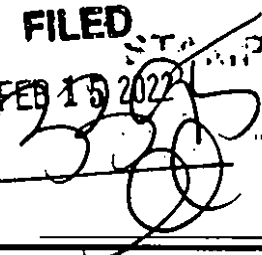


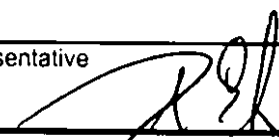


State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022
Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED
 FEB 15 2022
 BY 

1. Entity ID Number 102204		2. Exact name of the Corporation Thomas E. Sepe, M.D., Inc.			
3. Principal Office Address 33 Staniford Street		City Providence		State RI	Zip 02905
4. NAICS Code 621111		6. Brief description of the character of business conducted in Rhode Island To Engage in the Practice of Medicine			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Thomas E. Sepe, M.D.			Vice-President Name None		
Street Address 33 Staniford Street			Street Address		
City Providence		State RI	Zip 02905	City 	
Secretary Name			Treasurer Name		
Street Address			Street Address		
City		State	Zip	City	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Thomas E. Sepe, M.D.			Director Name		
Street Address 33 Staniford Stree			Street Address		
City Providence		State RI	Zip 02905	City 	
Director Name			Director Name		
Street Address			Street Address		
City		State	Zip	City	
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100		Common	\$0.01
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 Thomas E. Sepe, M.D.				Date 02/02/2022	
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