



**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: February 1 - May 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: 2023

1. Corporate ID No. 001749269

2. Name of Corporation TRIALMATCH.ME, INC.

3. Street Address Principal Business Office:

No. and Street: 4 HASHIZAF STREET

City or Town: RAANANA

State: FC

Zip: 4366411

Country: ISR

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.

541511

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

IMPROVING THE ACCESSIBILITY OF CANCER PATIENTS TO TREATMENTS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

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

CEO	TZVIA BADER MRS	47 ASHKENAZI ST TEL AVIV ISR
PRESIDENT	TZVIA BADER	47 ASHKENAZI STREET TEL AVIV, FC ISR
DIRECTOR	ROBERT GREENE MR	377 VALLEY RD PMB 80866 CLIFTON, NJ 07013 USA
DIRECTOR	SCOTT BARKLAY MR	377 VALLEY ROAD CLIFTON, NJ 07013 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		\$0.0001	11,500,000.00	0
PWP		\$0.0001	7,331,464.00	0

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 24 Day of January, 2023 at 12:06:53 PM. *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 EINAT SHEFER

Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

© 2007 - 2023 State of Rhode Island
All Rights Reserved