

Annual Report for the year: 2023

Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number 1006365		2. Exact name of the Limited Liability Company Angels Medical Associates, LLC			
3. NAICS Code 621111	Brief description of the Medical Services	Brief description of the character of business conducted in Rhode Island Medical Services			
5. State of Formation Rhode Island					
6. Principal Office Address 1524 Atwood Avenue, Suite 327		City Johnston	State RI	Zip 02919	
7. Mailing Address of Limit	ed Liability Company and Nam	e or Title of Contact Person	· · · · · · · · · · · · · · · · · · ·		
Contact Name Dr. P. Wilf	edo Canchis Contact Title				
Street Address 2 Ferncrest Court		City Lincoln	State RI	^{Zıp} 02865	
8. The Resident Agent info	rmation currently of record with	n the RI Department of State is acc	curate. Changes requir	e filing Form 642.	
	I declare and affirm that I ha tatements contained herein	ive examined this report, includi are true and correct.	ing any accompanyin	g schedules and	
Name of Authorized Person		Date 1/2			
Dr. P. Wilfredo Cano	his		21-	アノング	

MAIL TO:

Division of Business Services

Signature of Authorized Person

148 W. River Street, Providence, Rhode Island 02904-2615

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