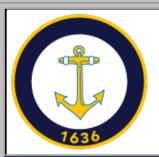
RI SOS Filing Number: 202329434030 Date: 2/27/2023 2:42:00 PM



# 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

**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. 000059971
- 2. Name of Corporation New England Medical Billing, Inc.
- 3. Street Address Principal Business Office:

No. and Street: 74 NEWMAN AVENUE, SUITE 100

City or Town: <u>RUMFORD</u> State: <u>RI</u> Zip: <u>02916</u> Country: <u>USA</u>

4. Business Phone No.

4018542450

5. State of Incorporation

State: RI

### **ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <a href="https://example.com/here.">here.</a> More information on <a href="https://example.com/nAICS">NAICS</a> can be found online.

541219

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

MEDICAL PRACTICE MANAGEMENT, BILLING SERVICES TO HOSPITALS,

PHYSICIANS, HEALTH

MAINTENANCE ORGANIZATIONS, FREE STANDING EMERGENCY ROOMS, AND

OTHER HEALTH CARE

**PROVIDERS WITHIN RI** 

#### 7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	THOMAS HALL	75 NEWMAN AVENUE, SUITE 100 RUMFORD, RI 02916 USA	
VICE PRESIDENT	WILLIAM CIOFFI	75 NEWMAN AVE RUMFORD, RI 02916	

## 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
CNP		\$0.0000	2,000.00	800

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 27 Day of February, 2023 at 2:43:39 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 THOMAS HALL

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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