



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
Corporation

→ 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 12207		2. Exact name of the Corporation ANDRE J. LAPRADE, D.M.D., Ltd.										
3. Principal Office Address 123 School Street		City Pawtucket	State RI									
		Zip 02860										
4. NAICS Code 621210	6. Brief description of the character of business conducted in Rhode Island Professional Dental Services											
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 Andre J. Laprade, D.M.D.		Vice-President Name Andre J. Laprade, D.M.D.										
Street Address 123 School Street		Street Address 123 School Street										
City Pawtucket	State RI	City Pawtucket	State RI									
Zip 02860		Zip 02860										
Secretary Name Andre J. Laprade, D.M.D.		Treasurer Name Andre J. Laprade, D.M.D.										
Street Address 123 School Street		Street Address 123 School Street										
City Pawtucket	State RI	City Pawtucket	State RI									
Zip 02860		Zip 02860										
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>												
Director Name Andre J. Laprade, D.M.D.		Director Name										
Street Address 123 School Street		Street Address										
City Pawtucket	State RI	City	State									
Zip 02860		Zip										
Director Name		Director Name										
Street Address		Street Address										
City	State	City	State									
Zip		Zip										
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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>500</td> <td>Common</td> <td>\$1.00</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	500	Common	\$1.00			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
500	Common	\$1.00										
Changes require an additional filing.												
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.												
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 Representative Andre J. Laprade, D.M.D.		Date 4/11/23										
Signature of Authorized Representative <i>[Signature]</i>		FILED										

APR 17 2023
BY ML 0796