



**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.** 001679639

**2. Name of Corporation** Boston Heart Diagnostics Corporation

**3. Street Address Principal Business Office:**

No. and Street: 175 CROSSING BLVD.  
SUITE 100

City or Town: FRAMINGHAM State: MA Zip: 01702 Country: USA

**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.

621511

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

CLINICAL LABORATORY

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

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	SCOTT MADEL	175 CROSSING BLVD FRAMINGHAM, MA 01702 USA
SECRETARY & TREASURER	DAN DICKINSON	2200 RITTENHOUSE ST. SUITE 150 DES MOINES, IA 50321 USA
TAX DIRECTOR	JUSTIN DUDAS	343 WEST MAIN STREET LEOLA, PA 17540 USA
DIRECTOR	MATTHEW URBANEK	18000 W. 99TH STREET LENEXA, KS 66219 USA
DIRECTOR	BRIAN TEES	2425 NEW HOLLAND PIKE LANCASTER, PA 17601 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>
CNP		\$0.0000	1,000.00	1000

**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 21 Day of April, 2023 at 2:59:47 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 SCOTT MADEL  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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