



**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 - ENTER THE CURRENT FILING YEAR 2023:** 2023

**1. Corporate ID No.** 000266377

**2. Name of Corporation** DVM Insurance Agency

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

No. and Street: 1800 EAST IMPERIAL HIGHWAY  
SUITE 145

City or Town: BREA State: CA Zip: 92821 Country: USA

**4. Business Phone No.**

6146772649

**5. State of Incorporation**

State: CA

**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.

522310

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

PET HEALTH INSURANCE PROVIDER

**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
DIRECTOR	JENNIFER YAROSS	1800 EAST IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 USA
TREASURER	MATTHEW NORDMAN	1800 EAST IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 USA
SECRETARY	DENISE L. SKINGLE	1800 EAST IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 USA
PRESIDENT	HEIDI SIROTA	1800 EAST IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 USA
DIRECTOR	HEIDI SIROTA	1800 EAST IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 USA
DIRECTOR	IAN JAY CZAJA	1800 EAST IMPERIAL HIGHWAY, SUITE 145 BREA, CA 92821 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	1.00	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 1 Day of May, 2023 at 3:46:38 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 DENISE L. SKINGLE

Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07