	State of Rhode	lolond	Fee: \$50.00							
	Office of the Secret		Fee. \$50.00							
M 🔶 🖊	Division Of Busines	-								
	148 W. River S	Street								
	Providence RI 029									
7636	(401) 222-30)40								
Foreign Business Corporation										
Annual Report Filing Period: February 1 - May 1										
In accordance with RIGL 71	2 1501(a) cach corporatio	n failing ar rafusing t	_							
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. 000105510										
2. Name of Corporation Aspen Dental Management, Inc.										
3. Street Address Principal B	usiness Office:									
No. and Street: 281 SANDI	ERS CREEK PKWY									
City or Town: EAST SYR		State: <u>NY</u> Zip: <u>130</u>	057 Country: <u>USA</u>							
4. Business Phone No.										
5. State of Incorporation										
State: <u>DE</u>										
	ARTICLE III									
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.										
<u>561110</u>										
6. Brief Description of the Character of Business Conducted in Rhode Island										
BUSINESS SUPPORT SERV	ICES									
7. Names and Addresses of the second	ne Officers and Directors:									
All officers and directors must be listed.										
Title	Individual Name		dress							
11	First, Middle, Last, Suffix	Address, City or Town	, State, Zip Code, Country							

SECRETARY	RICHARD PARR	281 SANDERS CREEK PKWY EAST SYRACUSE, NY 13057 USA	
DIRECTOR, PRESIDENT	ROBERT FONTANA	281 SANDERS CREEK PKWY EAST SYRACUSE, NY 13057 USA	
DIRECTOR, TREASURER	ALEXANDER WEISS	281 SANDERS CREEK PKWY EAST SYRACUSE, NY 13057 USA	
DIRECTOR	KEVIN RYAN	281 SANDERS CREEK PKWY EAST SYRACUSE, NY 13057 USA	

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per	T	Total Issued and
		Share	Total Authorized Shares	Outstanding Num of
			Number of Shares	Shares
CWP		\$0.0100	10.00	10

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 10 Day of May, 2023 at 10:45:06 AM. *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 KRISTIN OCHSNER

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2023 State of Rhode Island All Rights Reserved