



**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 YEAR 2024:** 2024

**1. Corporate ID No.** 001340370

**2. Name of Corporation** Intelligent Medical Objects, Inc.

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

No. and Street: 9600 W. BRYN MAWR AVENUE, SUITE 100  
SUITE 100

City or Town: ROSEMONT

State: IL Zip: 60018 Country: USA

**4. Business Phone No.**

8009279800

**5. State of Incorporation**

State: DE

**NAICS CODE**

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.

513210

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

THE TRANSACTION OF ANY LAWFUL BUSINESS FOR WHICH THE CORPORATION  
MAY BE  
ORGANIZED UNDER THE CORPORATION  
LAWS OF THE STATE.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

| Title     | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country    |
|-----------|------------------------------------------------|---------------------------------------------------------------|
| DIRECTOR  | ANNE BARNES                                    | 9600 W. BRYN MAWR AVENUE, SUITE 100<br>ROSEMONT, IL 60018 USA |
| PRESIDENT | ANN BARNES                                     | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| DIRECTOR  | ANDREW GARSKE                                  | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| DIRECTOR  | JACQUELINE KOSECOFF                            | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| DIRECTOR  | JON LANGE                                      | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| DIRECTOR  | JOSHUA NELSON                                  | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| DIRECTOR  | MIKE BELL                                      | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| SECRETARY | NICOLE PEARCE                                  | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| DIRECTOR  | PATRICK HACKETT                                | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| DIRECTOR  | SHAHAB VAGEFI                                  | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |
| TREASURER | TYLER ABELL                                    | 9600 W BRYN MAWR AVE SUITE 100<br>ROSEMONT, IL 60018 USA      |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares<br>Number of Shares | Total Issued and Outstanding<br>Num of Shares |
|----------------|-----------------|---------------------|---------------------------------------------|-----------------------------------------------|
| CWP            |                 | \$0.0100            | 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 1 Day of May, 2024 at 12:20:40 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 NICOLE PEARCE  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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