



State of Rhode Island  
Department of State - Business Services Division

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Annual Report for the year: 2024  
Limited Liability Company

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 000869968		2. Exact name of the Limited Liability Company PROSPECT PROVIDER GROUP RI, LLC	
3. NAICS Code 621610		4. Brief description of the character of business conducted in Rhode Island Health Care	
5. State of Formation DE			
6. Principal Office Address 3824 Hughes Ave.		City Culver City	State CA
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name		Contact Title	
Street Address 3824 Hughes Ave.		City Culver City	State CA
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642			
9. 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 Person Frank Saidara		Date 11/19/2024	
Signature of Authorized Person <i>Frank Saidara</i>			

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED** 11:50  
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 BY ZRR7W