



**State of Rhode Island
Department of State - Business Services Division**

Annual Report for the year: **2018**

Corporation

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

REC'D RI SOS 351
 25 MAR 27 4:11:24 PM '25

1. Entity ID Number 000799591		2. Exact name of the Corporation nContact Surgical, Inc.			
3. Principal Office Address 7555 Innovation Way			City Mason	State OH	Zip 45040
4. NAICS Code 339110		6. Brief description of the character of business conducted in Rhode Island No operations since 2015. The company previously sold medical devices to hospitals.			
5. State of Incorporation Delaware					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name None			Vice-President Name Justin Noznesky		
Street Address			Street Address 7555 Innovation Way		
City	State	Zip	City Mason	State Ohio	Zip 45040
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name None			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input checked="" type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
				PAR VALUE	
11. 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. 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 Representative Justin Noznesky				Date Mar 25, 2025	
Signature of Authorized Representative <u><i>Justin Noznesky</i></u> <small>Justin Noznesky (Mar 25, 2025 13:36 EDT)</small>					

FILED

MAR 27 2025
BY 3051D
AA 11:25 AM

<u>Class of Stock</u>	<u>Series</u>	<u>Par Value Per Share</u>	<u>Total Authorized</u>	<u>Total Issued and Outstanding</u>
Preferred	B	\$0.0000	2,619,080	0
Preferred	D	\$0.0000	4,464,726	0
Preferred	D-1	\$0.0000	3,491,620	0
Common		\$0.0000	20,696,284	0
Preferred	C	\$0.0000	2,282,981	0
Preferred	C-1	\$0.0000	1,289,210	0
Preferred	A	\$0.0000	2,755,372	0