



**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 2025: 2025

1. Corporate ID No. 001775341

2. Name of Corporation Hazel Health, Inc.

3. Street Address Principal Business Office:

No. and Street: 8300 ESTERS BOULEVARD

City or Town: IRVING

State: TX

Zip: 75063

Country: USA

4. Business Phone No.

807642935

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.

561110

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

ADMINISTRATIVE MANAGEMENT SERVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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TREASURER	CHERYL KIM	8300 ESTERS BOULEVARD IRVING, TX 75063 USA
SECRETARY	NICHOLAS WOODS	8300 ESTERS BOULEVARD IRVING, TX 75063 USA
VICE PRESIDENT	JEANNIE CHEN	8300 ESTERS BOULEVARD IRVING, TX 75063 USA
PRESIDENT	JOSH COLOMB	8300 ESTERS BOULEVARD IRVING, TX 75063 USA
VICE PRESIDENT	ANDREW POST	8300 ESTERS BOULEVARD IRVING, TX 75063 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>
CWP		\$0.0001	55,200,000.00	55200000
PWP	SEED	\$0.0001	477,941.00	477941
PWP	A-C1	\$0.0001	31,098,938.00	31098938

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 April, 2025 at 10:17:44 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 JOSHUA GOLOMB

Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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