



**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.** 000746223

**2. Name of Corporation** Philips Medical Systems (Cleveland), Inc.

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

No. and Street: 100 PARK AVENUE  
SUITE 300

City or Town: ORANGE VILLAGE State: OH Zip: 44122 Country: USA

**4. Business Phone No.**

978-659-4338

**5. State of Incorporation**

State: CA

**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.

339112

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

DESIGNER, DEVELOPER, MANUFACTURER, SALES AND SERVICER OF MEDICAL IMAGING EQUIPMENT AND RADIATION THERAPY PLANNING AND HEALTHCARE INFORMATION SOFTWARE SYSTEMS USED IN HOSPITALS AND CLINICS WORLDWIDE

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	ARVIND SUBRAMANIAN	222 JACOBS STREET CAMBRIDGE, MA 02141 USA
SECRETARY	JOSEPH E INNAMORATI	1600 SUMMER STREET STAMFORD, CT 06905 USA
VICE PRESIDENT	PAUL CAVANAUGH	222 JACOBS STREET CAMBRIDGE, MA 02141 USA
DIRECTOR	JOSEPH E INNAMORATI	1600 SUMMER STREET STAMFORD, CT 06905 USA
DIRECTOR	ARVIND SUBRAMANIAN	222 JACOBS STREET CAMBRIDGE, MA 02141 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>
CNP		\$0.0000	50,000,000.00	100
PNP		\$0.0000	5,000,000.00	0
PNP	A JR.	\$0.0000	250,000.00	0

**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 3 Day of April, 2025 at 4:33:58 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 JOSEPH E. INNAMORATI

Signature of Authorized Representative of the Corporation

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