



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2025

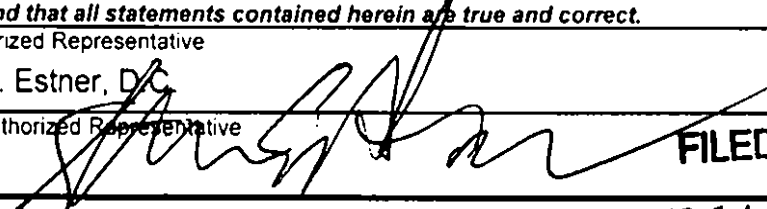
## Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number 125911		2. Exact name of the Corporation Dr. Stephen M. Estner, Professional Corporation		
3. Principal Office Address 875 Pontiac Avenue		City Cranston	State RI	
		Zip 02910		
4. NAICS Code 621310	6. Brief description of the character of business conducted in Rhode Island The provision of professional chiropractic services.			
5. State of Incorporation RHODE ISLAND				
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>				
President Name Stephen M. Estner, D.C.		Vice-President Name Stephen M. Estner, D.C.		
Street Address 875 Pontiac Avenue		Street Address 875 Pontiac Avenue		
City Cranston	State RI	City Cranston	State RI	
Zip 02910		Zip 02910		
Secretary Name Stephen M. Estner, D.C.		Treasurer Name Stephen M. Estner, D.C.		
Street Address 875 Pontiac Avenue		Street Address 875 Pontiac Avenue		
City Cranston	State RI	City Cranston	State RI	
Zip 02910		Zip 02910		
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>				
Director Name Stephen M. Estner, D.C.		Director Name		
Street Address 875 Pontiac Avenue		Street Address		
City Cranston	State RI	City	State	
Zip 02910		Zip		
Director Name		Director Name		
Street Address		Street Address		
City	State	City	State	
Zip		Zip		
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>				
This information is currently of record in the Department of State.  Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
		NUMBER OF SHARES CLASS/SERIES PAR VALUE		
		100	Common	No
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. <b>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.</b>				
Name of Authorized Representative Stephen M. Estner, D.C.			Date 2/3/25	
Signature of Authorized Representative  <b>FILED</b>				

## MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

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FORM 630 - Revised: 11/2021