

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

Professional 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**: <u>2025</u>

1. Corporate ID No. 001679105

2. Name of Corporation Eye Consultants of Rhode Island, Ltd

3. Street Address Principal Business Office:

No. and Street: 450 VETERANS MEMORIAL PARKWAY

SUITE 504

City or Town: <u>EAST PROVIDENCE</u> State: <u>RI</u> Zip: <u>02914 Country: USA</u>

4. Business Phone No.

401 431 1119

5. State of Incorporation

State: RI

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.

621320

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

TO ENGAGE IN THE PRACTICE OF MEDICINE AND SURGERY INCLUDING WITHOUT

LIMITATION THE PRACTICE OF OPHTHALMOLOGY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JORGE J RIVERA MD	24 ELM LANE BARRINGTON, RI 02806 USA
TREASURER	JORGE J RIVERA MD	24 ELM LANE BARRINGTON, RI 02806 USA
SECRETARY	JORGE J RIVERA MD	24 ELM LANE BARRINGTON, RI 02806 USA
OTHER OFFICER	SILVANA RIVERA	450 VETERANS MEMORIAL PARKWAY 504

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized	Total Issued and Outstanding
			Shares Number of Shares	Num of Shares
CNP		\$0.0000	4,000.00	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 25 Day of June, 2025 at 7:03:19 PM. 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 SILVANA RIVERA

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2025 State of Rhode Island All Rights Reserved