



**State of Rhode Island
Office of the Secretary of State**

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corp
Annual Report - Amended**

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.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2025

1. Corporate ID No. 001659781

2. Name of Corporation Accountable Healthcare Staffing, Inc.

3. Street Address Principal Business Office:

No. and Street: 4925 DAVIS BLVD., SUITE 202

City or Town: NORTH RICHLAND HILLS State: TX Zip: 76180 Country: USA

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.

561320

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

TEMPORARY STAFFING 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
SECRETARY	ANDREW DAIRE	4925 DAVIS BLVD., SUITE 202 NORTH RICHLAND HILLS, TX 76180 USA

CEO	TETSURO OMURA	4925 DAVIS BLVD., SUITE 202 NORTH RICHLAND HILLS, TX 76180 USA
DIRECTOR	TETSURO OMURA	4925 DAVIS BLVD., SUITE 202 NORTH RICHLAND HILLS, TX 76180 USA
DIRECTOR	JUN USAMI	4925 DAVIS BLVD., SUITE 202 NORTH RICHLAND HILLS, TX 76180 USA
DIRECTOR	NAOKI AOYAMA	4925 DAVIS BLVD., SUITE 202 NORTH RICHLAND HILLS, TX 76180 USA
DIRECTOR	HIROFUMI YAMAMOTO	4925 DAVIS BLVD., SUITE 202 NORTH RICHLAND HILLS, TX 76180 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		\$0.0010	5,000.00	5000

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 21 Day of November, 2025 at 4:25:47 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 ANDREW DAIRE

Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

November 21, 2025 04:25 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

