Matthew A. Brown, Secretary of State

AND PR	OF RHODE ISLAND OVIDENCE PLANTA he Secretary of State	TIONS		P	Corporations Divisio 148 W. River S Providence, RI 02904-261	
iling Period January	1 - March 1 ● Filing L. 7-1.2-1501(e), each co	Fee: \$50.00* rporation failing or refus	T FOR THE YEAR		401.222.304 - the time prescribed by	
1. Corporate ID No.	2. Name of Corpo					
10322	·	zger, DDS, Ltd	i.			
3. Street Address Princip		<u> </u>	City	State	Zip	
55 Jefferson Be			Warwick	RI	02888	
4. Business Phone No.		5. State of Ir	ncorporation			
101-781-5610		Rhode I	sland		9233	
6. Brief Description of the	Character of Business					
Medical Service						
7. NAMES AND ADDR		ICERS: ("X" BOX FOR	ATTACHMENT) [7] FILL IN:	SPACES BEFORE USIN	G ATTACHMENTS	
r. NAMES AND ADDR President Name	(E33E3 OF THE OFF	ICENS. (X DOX / CK	Vice President Name	01 7020 B21 0112 00111	• • • • • • • • • • • • • • • • • • • •	
Martin Metzger			Martin Metzger			
Street Address			Street Address			
55 Jefferson Boulevard			55 Jefferson Boulevard			
City	State	Zip	Citv	State	Zip	
Varwick	RI	02888	Warwick	RI	02888	
Secretary Name	IVI		Treasurer Name			
Martin Metzger			Martin Metzger			
Street Address			Street Address			
55 Jefferson B	oulevard		55 Jefferson Boulevard			
City	State	Zip	City	State	Zip	
Warwick	RI	02888	Warwick	RI	02888	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name		Director Name				
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
his report must be exect	uted on behalf of the co	corporation by an authorporation by the received	Under penalty of pe	rjury, I declare and affir g any accompanying sch nts contained herein are	m that I have examined nedules and statements a true and correct.	
File Date	20-2016	<u>/</u>	M/ Bake)	ne + 75- 205	1/15/10	
	20-2010 20579		Signature	, ,	Date	

FOR SECRETARY OF STATE USE ONLY

this report, including any accompanying scri and that all statements contained herein are	true and correct.
Mark The + 354 206	(/15/10
Signature	Date
Martin Metzger	
Print or Type Name	
President	
Title	