State of Rhode Island Fee: \$	50.00				
Office of the Secretary of State					
Division Of Business Services 148 W. River Street					
Providence RI 02904-2615					
1636 (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 <u>CURRENT</u> FILING YEAR 2023 : <u>2023</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					
<u>504</u>					
SUITE 504City or Town:EAST PROVIDENCEState:RIZip:02914Country:L	J <u>SA</u>				
4. Business Phone No.					
<u>4014311119</u>					
5. State of Incorporation					
State: <u>RI</u>					
ARTICLE III					
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.					
<u>621320</u>					
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.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

				Total Issued
Class of Stock	Series of Stock	Par Value Per		and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	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 4 Day of May, 2023 at 10:01:04 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 SILVANA RIVERA

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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