State of Rh		: \$50.00
Office of the Secretary of State Division Of Business Services		
148 W. Riv		
Providence RI		
(401) 222-3040		
Limited Liability Company Annual Report		
Filing Period: February 1 - May 1		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by		
law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.		
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR <b>2024</b> : <u>2024</u>		
1. ID No. 001714987		
2. Exact Name of the Limited Liability Company <u>CLINICAL CARE CONSULTANTS LLC</u>		
3. State of Formation		
State: <u>NJ</u>		
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.		
<u>541990</u>		
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island		
CONSULTING SERVICES		
5. Principal Office Address		
No. and Street: <u>1608 ROUTE 88-SUITE 200</u>		
City or Town: <u>BRICK</u>	State: <u>NJ</u> Zip: <u>08724</u> Country: <u>U</u>	<u>SA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name: Contact Title:		
No. and Street: <u>1608 ROUTE 88, SUITE 200</u> City or Town: <u>BRICK</u>	State: <u>NJ</u> Zip: <u>08724</u> Country: <u>L</u>	ISA
		<u> </u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11		
PARASEARCH, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888		

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 4 Day of April, 2024 at 11:33:33 AM by the authorized person.** *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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By YOGESH VIROJA

Signature of Authorized Person

Form No. 632 Revised 09/07

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