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Feb. 25
$50.00

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401 222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • ***Filing Fee: $50.00**** **THIS REPORT MUST BE TYPED OR P..INTED LEGIBLY IN BLACK INK**

** 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 prescr ed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation		
66758	PT FLoor Covering, Inc.		
3. Street Address Principal Business Office	City	State	Zip
91 North Main Street	Woonsocket	RI	02895
4. Business Phone No.	5. State of Incorporation		
401-766-8252	Rhode Island		

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

To engage in the sale of, repair of and maintenance of carpeting/flooring

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
Timothy Tessier			Marcia McBurney		
Street Address			Street Address		
83 Progresso Street			43 Glaude Lane		
City	State	Zip	City	State	Zip
Woonsocket	RI	02895	Woonsocket	RI	02895
Secretary Name			Treasurer Name		
Paul McBurney			Paul McBurney		
Street Address			Street Address		
43 Glaude Lane			See Above		
City	State	Zip	City	State	Zip
Woonsocket	RI	02895			

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
Timothy Tessier			Paul McBurney		
Street Address			Street Address		
See Above			See Above		
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

Number of Shares	Class/Series	Par Value
1,000	Common	No Par Value

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
200	Common	No Par Value

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.

[redacted]

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Paul M'Burney — 1/24/09
Signature — *Date*

Paul McBurney
Print or Type Name

[redacted] Secretary
Title

File Date **FILED**

Check No. FEB 13 2009

By: By 8718

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