

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 PRINTED LEGIBLY IN BLACK INK.

1. Corporate ID No. 134055	2. Name of Corp. PARAMOU	2. Name of Corporation PARAMOUNT RUG COMPANY, INC.				
3. Street Address Principal Business Office 430 WEST STREET			BROCKTON	State MA	02301	
		5. State of Incorporation MASSACHUSETT				
 Brief Description of the Chara INSTALLING FLOORIN 	G MATERIAL					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name GREGORY KASHGAGIAN Street Address 11 LINCOLN STREET			CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name CHRIS KASHGAGIAN Street Address 52 YARMOUTH AVENUE			
						Cin LAKEVILLE
Secretary Name CHRIS KASHGAGIAN			Treasurer Name CHRIS KASHGAGIAN			
Street Address 52 YARMOUTH AVENUE			Street Address 52 YARMOUTH AVENUE			
City BROCKTON	State MA	^{Zip} 02301	BROCKTON	State MA	^{Zip} 02301	
8. NAMES AND ADDRES Director Name GREGORY KASHGA		ECTORS: ("X" BOX FOR AT	TACHMENT) FILL II Director Name	N SPACES BEFORE USI	NG ATTACHMENTS	
Street Address 11 LINCOLN STREET			Street Address			
City LAKEVILLE	State MA	Zip 02346	City	State	Zip	
Director Name CHRIS KASHGAGIAI	V		Director Name			
Street Address 52 YARMOUTH AVENUE			Street Address			
City BROCKTON	State MA	<i>Zip</i> 02301	City	State	Zip	
). SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
This information is curre	ently of record in t	he Office of the Secretary of	Number of Shares	Class/Series	Par Value	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			100	N/A	NPV	
This report must be executhis report must be executhis	uted on behalf of the	the corporation by an authoriz	ed representative. If the or trustee.	corporation is in the har	nds of a receiver or tru	

File Date FILED	
Check No. FEB 2 0 2009	
By:	

Under penalty of perjury, I declare and affirm that including any accompanying schedules and states	t I have examined this report, nents, and that all statements
contained hereinfare true and correct.	1 /
July Johnson	1/19/09
Signature	Date
['] GRÉGÓRY KASHGAGIAN	
Print or Type Name	
PRESIDENT	
Title	