

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2010

Filing Period: September 1 - November 1 - Filing Fee: \$50.00* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* 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.

1. ID No. 154255	i i	name of the limited liability company LOORS LLC					
3. State of Formation	4. Brief description of the character of the husine. Installation of various floor coverir			ousiness which is actually conducted in verings	ess which is actually conducted in Rhode Island Ngs		
5. Principal office address 21 Boundary Ave				Johnston	State RI	<i>Ζί</i> ρ 02919	
Contact Name		IMITED LIAB	ILITY COMPANY AN	ID NAME OR TITLE OF CONT	TACT PERSON:		
Edward J. Petru	ICCI		·	Owner	1 -		
Street Address 21 Boundary Ave				City Johnston	State R1	^{Zip} 02919	
7. name and ad	DRESS O			ED LIABILITY COMPANY, IF ING ATTACHMENTS ("X" BO			
Manager Name				Manager Name	Manager Name		
Street Address				Street Address	Street Address		
City		State	Zip	City	State	Zip	
Manager Name				Manager Name	Manager Name		
Street Address				Street Address	Street Address		
City		State	Zip	City	State	Zip	
8. RESIDENT AGI			Office of the Secretar	; y of State. Changes require filing	I g of Form 642 - R.I.G.L. 7-1	t 16-11	

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

154255

File Date	9-2-2010
	1660
Check No.	mnc
Ву:	FOR SECRETARY OF STATE USE ONLY

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.

Signature of Authorized Person

Date

Edward J. Petrucci

Print or Type Name of Authorized Person