

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 2011

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED 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 prescribed by law (R.I.G.L. 7-1.2-150).

* In accordance with R.I.G.L. /-1,2-1 subject to a penalty fee of \$25.00.	1501(e), each corporation fa	iling or refusing to file its anni	ual report within thirty (30) day	is after the time prescribed by la	w (K.1.G.L. /-1.2-1501(c&d)) is		
1. Corporate ID No. 125567	2. Name of Corporation Massud & Sons Discount Carpet Center, Inc.						
3. Street Address Principal Business Office 772 Dexter Street			City Central Falls	State RI	^{Zip} 02863		
4. Business Phone No. 401-724-6674 5. State of Incorporation Rhode Island							
6. Brief Description of the Character of To engage in the business of			r coverings and surfaces	s of all kinds.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Joseph M. Massud			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Paul S. Massud				
Street Address 772 Dexter Street			Street Address 772 Dexter Street				
City Central Falls	State RI	^{2ip} 02863	City Central Falls	State RI	^{Zip} 02863		
Secretary Name Michael A. Massud			Treasurer Name Michael A. Massud				
Street Address 772 Dexter Street			Street Address 772 Dexter Street				
Central Falls	State RI	^{Zip} 02863	City Central Falls	State RI	^{Zip} 02863		
8. NAMES AND ADDRESSES Director Name Joseph M. Massud	OF THE DIRECTOR	s: ("X" BOX FOR ATT	ACHMENT) THE FILL IN Director Name None	SPACES BEFORE USIN	G ATTACHMENTS		
Street Address 772 Dexter Street			Street Address				
City Central Falls	State RI	<i>Ztp</i> 02863	City	State	Zip		
Director Name None			Director Name None				
Street Address			Street Address				
City	State	Zíp	City	State	Zip		
9. SHARES AUTHORIZED	e <mark>I</mark> desemble to a president de la seconda General de la policidad de la secondad de la second General de la secondad		ti att bir hitratikit dribbinin finstalik asal, sak	("X" BOX FOR ATTAC	——————————————————————————————————————		
This information is currently	of record in the Offi	ce of the Secretary of	Number of Shares	Class/Series	Par Value		
State. Changes require an additional filing. See Section 9 of instruction sheet.			100	Common	No Par Value		
					tiga wi		
This report must be executed this report must be executed				orporation is in the hand	ls of a receiver or trustee,		

File Date			EN		
Check No.		ED A			
Ву:		ED U	7 201 2 10 1	رر	
.	FOR SEC	RETARY	OFSTAL	EUSETOM	

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 therein are true and correct.
Lesh M. May 3/9/3011
Signature Date
Joseph M. Masstrd
Print or Type Name
President
Trata