



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 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. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. SD6517		2. Name of Corporation DOOR SYSTEMS, INC.			
3. Street Address Principal Business Office 120 ALEXANDER ST			City FRAMINGHAM	State MA	Zip 01702
4. Business Phone No. 508-875-3508		5. State of Incorporation MASSACHUSETTS			
6. Brief Description of the Character of Business Conducted in Rhode Island SALE AND SERVICE OF GARAGE DOORS, OPENERS, AND PARTS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name LARS A NIIT			Vice President Name NONE		
Street Address 12 EVERETT ST			Street Address NONE		
City SHERBORN	State MA	Zip 01770	City NONE	State NONE	Zip NONE
Secretary Name LARS A NIIT			Treasurer Name LARS A NIIT		
Street Address 12 EVERETT ST			Street Address 12 EVERETT ST		
City SHERBORN	State MA	Zip 01770	City SHERBORN	State MA	Zip 01770
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name LARS A NIIT			Director Name NONE		
Street Address 12 EVERETT ST			Street Address NONE		
City SHERBORN	State MA	Zip 01770	City NONE	State NONE	Zip NONE
Director Name NONE			Director Name NONE		
Street Address NONE			Street Address NONE		
City NONE	State NONE	Zip NONE	City NONE	State NONE	Zip NONE
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
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.			Number of Shares	Class/Series	Par Value
			12500	CNP	0
			1000	PNP	0

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.

FILED

File Date **MAR 31 2011**

Check No. **141459 9.54**

By: **BY**

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 **LARS A NIIT** Date **3/22/11**

Print or Type Name
LARS A NIIT

Title
PRESIDENT