



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 105154		2. Exact name of the Corporation M&R Floors, Incorporated			
3. Principal office address 250 Lynne Lane		City Mapleville	State RI	Zip 02839	
4. Business Phone No. (401) 578-0851		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island to engage in the sales and installation of floor covering and to engage in any other lawful activities allowed under state law					
President Name Michael J. Canavan			Vice-President Name None		
Street Address 250 Lynne Lane			Street Address		
City Mapleville	State RI	Zip 02839	City	State	Zip
Secretary Name Michael J. Canavan			Treasurer Name Michael J. Canavan		
Street Address 250 Lynne Lane			Street Address 250 Lynne Lane		
City Mapleville	State RI	Zip 02839	City Mapleville	State RI	Zip 02839
Director Name Michael J. Canavan			Director Name		
Street Address 250 Lynne Lane			Street Address		
City Mapleville	State RI	Zip 02839	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 1250	CLASS/SERIES common	PAR VALUE 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.

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.

FILED

MAR 04 2014

Michael J. Canavan 2-28-14 ✓
Signature of Authorized Representative Date

Michael J. Canavan, President

Print or Type Name of Authorized Representative