



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017

Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 14097		2. Exact name of the Corporation Nassa Flooring Company, Inc.			
3. Principal Office Address 301 Knight Street			City Providence	State RI	Zip 02909
4. NAICS Code 81		6. Brief description of the character of business conducted in Rhode Island Installation and repair of floors and surfaces			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Edward Schultz, Jr.			Vice-President Name Edward Schultz, III		
Street Address 36 Bluff Avenue			Street Address 239 Atlantic Avenue		
City Warwick	State RI	Zip 02889	City Warwick	State RI	Zip 02888
Secretary Name Edward Schultz, Jr.			Treasurer Name Edward Schultz, Jr.		
Street Address 36 Bluff Avenue			Street Address 36 Bluff Avenue		
City Warwick	State RI	Zip 02889	City Warwick	State RI	Zip 02889
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued		
This information is currently of record in the Department of State. Changes require an additional filing.			Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	Common	No Par Value
11. 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.					
Name of Authorized Representative Edward Schultz, Jr., President					Date 1/30/2017
Signature of Authorized Representative <i>[Signature]</i>					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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