



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 22566		2. Exact name of the Corporation Ruggieri Floor Fashions, Inc.			
3. Principal Office Address 110 Comstock Parkway		City Cranston		State RI	Zip 02921
4. NAICS Code 53 - Real Estate and Rental anc		6. Brief description of the character of business conducted in Rhode Island Real estate holding and management			
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 Richard P. Ruggieri			Vice-President Name Paul E. Ruggieri		
Street Address 110 Comstock Parkway			Street Address 110 Comstock Parkway		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Secretary Name Frank Ruggieri			Treasurer Name Frank Ruggieri		
Street Address 110 Comstock Parkway			Street Address 110 Comstock Parkway		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Frank Ruggieri			Director Name Paul E. Ruggieri		
Street Address 110 Comstock Parkway			Street Address 110 Comstock Parkway		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Director Name Richard P. Ruggieri			Director Name		
Street Address 110 Comstock Parkway			Street Address		
City Cranston	State RI	Zip 02921	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES		CLASS/SERIES
			600		Class A Common
			0		Class B Common
					\$1.00 par value
					\$1.00 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 Richard P. Ruggieri, President					Date 2-1-17
Signature of Authorized Representative 					

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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