



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

*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.*

**ANNUAL REPORT YEAR:** 2017

**1. Corporate ID No.** 000522555

**2. Name of Corporation** CREATIVE FACILITY DESIGN, INC.

**3. Street Address Principal Business Office:**

No. and Street: 82 WEST RESERVOIR ROAD  
City or Town: SMITHFIELD State: RI Zip: 02917 Country: USA

**4. Business Phone No.**

401-488-5834

**5. State of Incorporation**

State: RI

**ARTICLE III**

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code  54

**6. Brief Description of the Character of Business Conducted in Rhode Island**

CREATIVE FACILITY DESIGN IS AN ENVIRONMENTAL ENERGY CONSULTANCY THAT OFFERS A WIDE RANGE OF SERVICES: THEY CAN EVALUATE THE PERFORMANCE OF LOAD VERSUS COOLING FOR ANY GIVEN EQUIPMENT DISTRIBUTION IN AN EXISTING OR NEW FACILITY BY CREATING THE VIRTUAL FACILITY (VF) REPRESENTATION OF THE DATA CENTER. THIS IS DONE USING A UNIQUE APPLICATION CALLED 6SIGMADC SOFTWARE TOOLS. THESE CONSULTATIONS CAN CONTINUE TO FORM THE BASIS OF FURTHER OPTIMIZATION FOR THE FACILITY DESIGN. FOR A TYPICAL PRESSURIZED FLOOR FACILITY, THESE CAN INCLUDE:- FLOOR VOID DEPTH ANALYSIS AGAINST PRESSURE DISTRIBUTION - SIZE AND DISTRIBUTION OF AIR HANDLER UNITS - FLOOR TILE LAYOUT AND THE SUBSEQUENT AIRFLOW THROUGH

THEM - EQUIPMENT LOAD DISTRIBUTION - FAILURE ANALYSIS. THE COMPANY EMPHASIZES SERVICE AND SUPPORT TO DIFFERENTIATE ITSELF FROM MORE PRICE-ORIENTED SERVICE COMPANIES.

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	PAUL ROLAND BRIN	82 WEST RESERVOIR ROAD SMITHFIELD, RI 02917 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
STK		\$0.0100	10,000.00	100

**9. 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.**

*Signed this 20 Day of February, 2017 at 1:00:42 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By PAUL BRIN  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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