State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED
FEB 10 2020
BY 4301

Annual Report for the year: 2020
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	2. Exact name of the Corporation
22566	Ruggieri Floor Fashions, Inc.

3. Principal Office Address	City	State	Zip
110 Comstock Parkway	Cranston	RI	02921

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
531120	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 ☐

President Name	Vice-President Name
Richard P. Ruggieri	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 ☐

Director Name	Director Name
Richard P. Ruggieri	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: Frank 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 ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
600	Class A Common	$1.00 par value
0	Class B Common	$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	Date
Richard P. Ruggieri, President	1-31-20

Signature of Authorized Representative: Richard P. Ruggieri — SIGN DOCUMENT HERE

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