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

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BUS SVCS DIV
2021 MAR 29 P 2:58

Annual Report for the year: 2021
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			
122131	FLOOR SYSTEMS, INC.			
3. Principal Office Address		City	State	Zip
54C Vermont Avenue		Warwick	RI	02888
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
238330	TO PROVIDE FLOORING SERVICES			
5. State of Incorporation				
RI				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Street Address	City	State	Zip
Kevin Haughey	54C Vermont Avenue	Warwick	RI	02888

Vice-President Name	Street Address	City	State	Zip
Amy Haughey	54C Vermont Avenue	Warwick	RI	02888

Secretary Name	Street Address	City	State	Zip
Kevin Haughey	54C Vermont Avenue	Warwick	RI	02888

Treasurer Name	Street Address	City	State	Zip
Amy Haughey	54C Vermont Avenue	Warwick	RI	02888

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Street Address	City	State	Zip
Kevin Haughey	54C Vermont Avenue	Warwick	RI	02888

Director Name	Street Address	City	State	Zip
Amy Haughey	54C Vermont Avenue	Warwick	RI	02888

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	100		0

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
Kevin Haughey	2/15/2021

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

FILED
MAR 29 2021

FORM 630 - Revised: 10/2017