

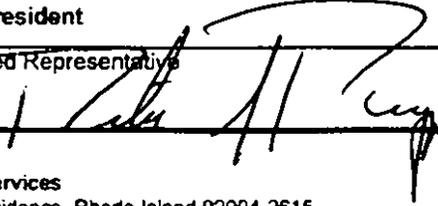


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2022
Corporation

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

FEB 14 2022
 BY 28399
 OS

1. Entity ID Number 000063421		2. Exact name of the Corporation Ruggieri Flooring, Inc.			
3. Principal Office Address 1191 Pontiac Avenue			City Cranston	State RI	Zip 02920
4. NAICS Code 238330		6. Brief description of the character of business conducted in Rhode Island Sale and installation of floor coverings and flooring			
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 Peter J. Ruggieri			Vice-President Name David A. Ruggieri		
Street Address 1191 Pontiac Avenue			Street Address 1191 Pontiac Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Peter J. Ruggieri			Treasurer Name David A. Ruggieri		
Street Address 1191 Pontiac Avenue			Street Address 1191 Pontiac Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name David A. Ruggieri			Director Name Peter J. Ruggieri		
Street Address 1191 Pontiac Avenue			Street Address 1191 Pontiac Avenue		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			400	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 Peter J. Ruggieri, President					Date 01-31-2022
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