



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:
Corporation

2023

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number 000821361		2. Exact name of the Corporation Scott Sales Service Ltd	
3. Principal Office Address 55 MINNESOTA AVE		City WARWICK	State RI.
		Zip 02888	
4. NAICS Code 23833	6. Brief description of the character of business conducted in Rhode Island FLOOR COVERING		
5. State of Incorporation RI.			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name RONNY B. WARE		Vice-President Name	
Street Address 217 PINE RIVER DR.		Street Address	
City NO KINGSTOWN	State R.I.	Zip 02852	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name RONNY B. WARE		Director Name	
Street Address SAME AS ABOVE		Street Address	
City	State	Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized 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.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
		NUMBER OF SHARES 600	CLASS/SERIES CHP
		PAR VALUE \$0.00	
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 R B Ware Pres.		Date 3/28/2023	
Signature of Authorized Representative Ronny B Ware Pres.			

MAIL TO:

Division of Business Services

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