


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000069787**

1. Entity Name  
**RICK CASE CARS, INC.**



Principal Place of Business  
**500 EAST BROWARD BLVD SUITE 1950  
 FORT LAUDERDALE, FL 33394**

Mailing Address  
**500 EAST BROWARD BLVD SUITE 1950  
 FORT LAUDERDALE, FL 33394**

**DO NOT WRITE IN THIS SPACE**



03102006 No Chg-P CR2E034 (11/05)

4. FEJ Number **65-1041944** | Applied For  
 | Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HARDIN, DAVID C  
 500 EAST BROWARD BLVD SUITE 1950  
 FORT LAUDERDALE, FL 33394**

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASE, RICK 949 HILLSBORO MILE HILLSBORO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASE, RITA 949 HILLSBORO MILE HILLSBORO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000538986  
 05/09/06-80083-004 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4/5/06** **954-377-7420**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #