2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S99472

Entity Name: RIDGEFIELD CORPORATION

9962 RIDGEFIELD DRIVE

JACKSONVILLE, FL

Address: City-St-Zip: FILED Apr 22, 2004 Secretary of State

| Littly Na | ille. KIDGELIEL | DCORFORATION | | | |
|---|---|-----------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| | ANDING BLVD WILLE, FL 32210 |) US | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| | ANDING BLVD WILLE, FL 32210 |) US | | | |
| FEI Number | : 59-3131358 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address o | Name and Address of New Registered Agent: | |
| JACKSON The above | BEFIELD DR. IVILLE, FL 3225 | | e purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUI | | | | | |
| | Electronic | Signature of Registered A | gent | Date | |
| Election Car | mpaign Financing 1 | rust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGI | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | VD () D MIZRAHI NANCY . 9962 RIDGEFIEL JACKSONVILLE, | A., D DRIVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | ST () D MIZRAHI, NANCY 9962 RIDGEFIEL JACKSONVILLE, | A., D DR | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | PD () D MIZRAHI, JACK D | | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: NANCY A. MIZRAHI VD 04/22/2004