

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816756

FILED  
Apr 13, 2005  
Secretary of State

Entity Name: RIBBON CRAFTERS, INC.

**Current Principal Place of Business:**

2070 CALUMET ST.  
P.O. BOX 4868  
CLEARWATER, FL 33758 US

**New Principal Place of Business:**

2070 CALUMET ST.  
CLEARWATER, FL 33765 US

**Current Mailing Address:**

2070 CALUMET ST.  
P.O. BOX 4868  
CLEARWATER FLA, FL 33765 US

**New Mailing Address:**

P.O. BOX 4868  
CLEARWATER FLA, FL 33758 US

FEI Number: 59-1004023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOULAH, JAMES P.  
9902 SADDLE RD.  
TAMPA, FL 33626 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BEAUDINE, EVA,  
Address: 90 GRETCHEN CT.  
City-St-Zip: OLDSMAR, FL 34677 US

Title: D ( ) Delete  
Name: GOULAH, NANCY,  
Address: 9902 SADDLE ROAD  
City-St-Zip: TAMPA, FL 33626 US

Title: PD ( ) Delete  
Name: GOULAH, JAMES,  
Address: 9902 SADDLE ROAD  
City-St-Zip: TAMPA, FL 33626 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: JAMES P. GOULAH

PRES

04/13/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date