


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jul 15, 2005 08:00 AM
Secretary of State**

DOCUMENT # F02000006152
1. Entity Name
RIC-MAN CONSTRUCTION, INC.



Principal Place of Business Mailing Address
6850 NINETEEN MILE ROAD 6850 NINETEEN MILE ROAD
STERLING HGTS, MI 48314 STERLING HGTS, MI 48314

DO NOT WRITE IN THIS SPACE



07012005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
38-1943960 Not Applicable

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

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 _____

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

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	PD MANCINI, STEVEN 6850 NINETEEN MILE ROAD STERLING HGTS, MI 48314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MANCINI, EDWARD 6850 NINETEEN MILE ROAD STERLING HGTS, MI 48314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANCINI, DANIEL 6850 NINETEEN MILE ROAD STERLING HGTS, MI 48314
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07/15/05-80004-019 550.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Edward Mancini* 7-11-05 586-739-5210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #