2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G48151

Entity Name: RIC-MAN INTERNATIONAL, INC.

FILED Mar 21, 2007 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | | |
|---|---------------------------------|---|---|--|--|
| | 48TH STREE O BEACH, FL | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| | 48TH STREE O BEACH, FL | | | | |
| FEI Number | : 59-2300398 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired (X) | |
| Name and | d Address of | Current Registered Agent: | Name and Address | of New Registered Agent: | |
| POMPANO | 48TH STREET O BCH., FL 3: | 3073 US | | | |
| | e named entity e of Florida. | submits this statement for the | purpose of changing its registere | d office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | | nic Signature of Registered Ag | ent | Date | |
| Election Ca | mpaign Financir | ng Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | MANCINI, DAV 2601 NW 48T | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | CASTILLO SR 2601 NW 48TI | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | JANKOWSKI, 6939 NINETEI |) Delete PAUL C JR EN MILE ROAD :IGHTS, MI 48314 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | JANKOWSKI, |) Delete LISA M EN MILE ROAD | Title: Name: Address: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip:

| SIGNATURE: DAVID A MANCINI | DP | 03/21/2007 |
|----------------------------|----|------------|
| | DF | |

STERLING HEIGHTS, MI 48314

City-St-Zip: