

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K66013

FILED
Jan 17, 2006
Secretary of State

Entity Name: RICCIARDELLI INSULATION CONTRACTING, INC.

Current Principal Place of Business:

C/O MICHAEL RICCIARDELLI
6881 W. WEDGEWOOD AVE
DAVIE, FL 33331 US

New Principal Place of Business:

C/O MICHAEL RICCIARDELLI
3140 W PEMBROKE RD 555
PEMBROKE PARK, FL 33009 US

Current Mailing Address:

C/O MICHAEL RICCIARDELLI
6881 W. WEDGEWOOD AVE.
DAVIE, FL 33331 US

New Mailing Address:

C/O MICHAEL RICCIARDELLI
P.O. BOX 4288
HOLLYWOOD, FL 33083 US

FEI Number: 65-0112229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICCIARDELLI, MICHAEL N
6881 W. WEDGEWOOD AVE.
DAVIE, FL 33331 US

Name and Address of New Registered Agent:

RICCIARDELLI, MICHAEL N
1635 MILLER DRIVE
DELAND, FL 32720 US

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: MICHAEL RICCIARDELLI

01/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RICCIARDELLI, MARGARET M
Address: 6881 W. WEDGEWOOD AVE.
City-St-Zip: DAVIE, FL 33331

Title: STD () Delete
Name: RICCIARDELLI, MICHAEL N.
Address: 6881 W. WEDGEWOOD AVE
City-St-Zip: DAVIE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RICCIARDELLI, MARGARET M
Address: 1635 MILLER DRIVE
City-St-Zip: DELAND, FL 32720 US

Title: STD (X) Change () Addition
Name: RICCIARDELLI, MICHAEL N.
Address: 1635 MILLER DRIVE
City-St-Zip: DELAND, FL 32720 US

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.

SIGNATURE: MICHAEL RICCIARDELLI

STD

01/17/2006

Electronic Signature of Signing Officer or Director

Date