## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT # P00000018026** 03-23-2006 90023 031 \*\*\*150.00 SFR ENTERPRISES, INC. Principal Place of Business Mailing Address 1321 SE 1 AVE 1321 SE 1 AVE **20005205** DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142006 CR2E034 (11/05) Cha-P Applied For City & State City & State 4. FEI Number 65-0985643 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RICCO, STEPHEN F Street Address (P.O. Box Number is Not Acceptable) 1321 SE 1 AVE DEERFIELD BEACH, FL. 33441 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11. PD Change ☐ Addition mir ☐ Delete TITLE RICCO, STEPHEN F NAME NAME STREET ADDRESS 1321 SE 1 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH, FL 33441 ☐ Delete TILE Change | Addition ·IIILE S,D RICCO, ELAINE A NAME NAME STREET ADDRESS STREET ADDRESS 1321 SE 1 AVE CITY-ST-ZIP DEERFIELD BEACH, FL 33441 CITY-ST-ZIP Addition ☐ Deteta TITLE. MLE JON RICCO NAME ', NAME 1321 SE I AVENUE STREET ADDRESS STREET ADDRESS DEERFIELD BEACH, FL. 33441 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition □ Detete TILE ΠŒ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition TILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in the property with an address, with all other like empowered. b all other like empowered. SIGNATURE: Z

Stephen F. Ricco, President

FILED

Mar 23, 2006 8:00 am