


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000005669
 1. Entity Name
 RICK CASE CYCLES, INC.



Principal Place of Business: 500 EAST BROWARD BLVD. SUITE 1950 FORT LAUDERDALE, FL 33394
 Mailing Address: 500 EAST BROWARD BLVD. SUITE 1950 FORT LAUDERDALE, FL 33394



DO NOT WRITE IN THIS SPACE

01132005 No Chg-P CR2E034 (10/03)
 4. FEI Number: 65-1089723 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HARDIN, DAVID C
 500 EAST BROWARD BLVD.
 SUITE 1950
 FORT LAUDERDALE, FL 33394

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 \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CASE, RICK
STREET ADDRESS	949 HILLSBORO MILE
CITY-ST-ZIP	HILLSBORO BEACH, FL 33062
TITLE	D
NAME	CASE, RITA
STREET ADDRESS	949 HILLSBORO MILE
CITY-ST-ZIP	HILLSBORO BEACH, FL 33062
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000331600
 04/26/05-80025-001 150.00
DO NOT WRITE IN THIS SPACE

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: Rita Case 4/18/05 954-377-7420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAY Daytime Phone If