


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000076359</b> 1. Entity Name KRIB CORPORATION	
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Principal Place of Business 3909 LITHIA RIDGE BLVD VALRICO, FL 33594	Mailing Address 3909 LITHIA RIDGE BLVD VALRICO, FL 33594
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**DO NOT WRITE IN THIS SPACE**



02262006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0085784	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BIRK, RONALD F.  
3909 LITHIA RIDGE BLVD  
VALRICO, FL 33594

**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 \_\_\_\_\_

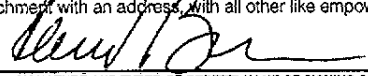
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BIRK, RONALD F. 3909 LITHIA RIDGE BLVD VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVD BIRK, DENISE E 3907 LITHIA RIDGE BLVD VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BIRK, STEVEN E 1813 GLEN BAY COURT WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RITTER, CHRISTINE 7415 ELSWORTH COURT ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000536289  
05/08/06-80087-024 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **4/21/06** **813 654 7157**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #