
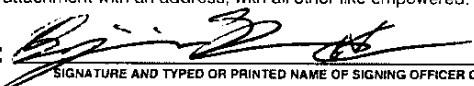


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90146 004 ***150.00

DOCUMENT # P04000003073 1. Entity Name KRICK ENTERPRISES, INC.																																																	
Principal Place of Business 1280 OAKES BLVD NAPLES, FL 34119-1304			Mailing Address 1280 OAKES BLVD NAPLES, FL 34119-1304																																														
2. Principal Place of Business		3. Mailing Address																																															
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																															
City & State		City & State																																															
Zip	Country	Zip	Country																																														
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																																														
KRICK, BENJAMIN IV 1280 OAKES BLVD NAPLES, FL 34119-1304			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL 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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees																																															
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; padding: 2px;">TITLE</td> <td style="width:10%; padding: 2px;">P</td> <td style="width:60%; padding: 2px;"> KRICK, BENJAMIN IV 1280 OAKES BLVD NAPLES, FL 341191304 </td> <td style="width:20%; padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">VP</td> <td style="padding: 2px;"> ACEVEDO, EDWARD 1280 OAKES BLVD. NAPLES, FL 34119 </td> <td style="padding: 2px; text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">-</td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table>			TITLE	P	KRICK, BENJAMIN IV 1280 OAKES BLVD NAPLES, FL 341191304	<input type="checkbox"/> Delete	TITLE	VP	ACEVEDO, EDWARD 1280 OAKES BLVD. NAPLES, FL 34119	<input checked="" type="checkbox"/> Delete	TITLE	-		<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; padding: 2px;">TITLE</td> <td style="width:10%; padding: 2px;">VP</td> <td style="width:60%; padding: 2px;"> Jeremiha Dumansky 1280 Oakes Blvd. Naples, FL 34119-1304 </td> <td style="width:20%; padding: 2px; text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>			TITLE	VP	Jeremiha Dumansky 1280 Oakes Blvd. Naples, FL 34119-1304	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  4/6/05 239-404-5303 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																	



01172005 Chg-P CR2E034 (10/03)

4. FEI Number **90-0142937** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**