2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000004650

1. Entity Name

RICKS MOBILE HOME IMPROVEMENTS INC.



FILED Feb 09, 2006 08:00 AN Secretary of State

Principal Place of Business 5601 3RD AVE UNIT 1 KEY WEST, FL 33040-6033 Mailing Address
55 BOCA CHICA RD
LOT #21 SEASIDE
KEY WEST, FL 33040



DO NOT WRITE IN THIS SPACE

01202006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 65-0532107 Not Applicable

 \Box

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ERDMAN, RICHARD F 55 BOCA CHICA RD., LOT 21 KEY WEST, FL 33040

DO NOT WRITE IN THIS SPACE

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	named entily submits this statement for the plans of registered agent.	urpose of changing its	s registered office or	registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typod or printed name of registered agent and title	f applicable (NO	TE. Registered Agent signal	re required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00				\$5.00 May Be Added to Fees	U00000427107 02/20/06-80068-022 150.00
10.	OFFICERS AND DIREC	TORS		· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ERDMAN, RICHARD F 55 BOCA CHICA RD., LOT 21 KEY WEST, FL 33040				· · _ · _
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS KIRKPATRICK, CHERYL M 55 BOCA CHICA RD., LOT 21 KEY WEST, FL 33040				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby	certify that the information supplied with this fi	ing does not qualify f	for the exemptions c	ontained in Chapter 11	9, Florida Statutes. I further certify that the information

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. If 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: Richard F. Endman RICHARD F. ERDMAN	1/30/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone ¥