


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # P04000097579
1. Entity Name
RIDAM CORPORATION



Principal Place of Business Mailing Address
7665 W 2ND CT 7665 W 2ND CT
HIALEAH, FL 33014 HIALEAH, FL 33014



03172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1304523	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

RICCI, MARIBEL G
20211 NW 8 ST
HOLLYWOOD, FL 33029

**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 designations of registered agent.

SIGNATURE: _____
Signature of the officer or director of the corporation or the registered agent 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 a "other" fee empowered.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	DV RICCI, DANIEL M 7665 W 2ND CT HIALEAH, FL 33014
TITLE NAME STREET ADDRESS CITY ST ZIP	DP D'AMICO, PASCUAL A 7665 W 2ND CT HIALEAH, FL 33014
TITLE NAME STREET ADDRESS CITY ST ZIP	DS D'AMICO, SONIA M 7665 W 2ND CT HIALEAH, FL 33014
TITLE NAME STREET ADDRESS CITY ST ZIP	DT RICCI, MARIBEL G 7665 W 2ND CT HIALEAH, FL 33014
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

U00000894133
04/24/08-80015-024 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information submitted 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 I 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 a "other" fee empowered.

SIGNATURE: *Maribel Ricci* 4-09-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CK1238