

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000125504

Entity Name: BLACK RIBBON, INC.

FILED
Feb 15, 2006
Secretary of State

Current Principal Place of Business:

912 20TH PLACE
VERO BEACH, FL 32960 US

New Principal Place of Business:

126 43RD AVENUE
VERO BEACH, FL 32968 US

Current Mailing Address:

912 20TH PLACE
VERO BEACH, FL 32960 US

New Mailing Address:

126 43RD AVENUE
VERO BEACH, FL 32968 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STODDARD, NICHOLAS
912 20TH PLACE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

STODDARD, NICHOLAS
126 43RD AVENUE
VERO BEACH, FL 32968 US

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.

SIGNATURE:

02/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: STODDARD, NICHOLAS
Address: 912 20TH PLACE
City-St-Zip: VERO BEACH, FL 32960 US

Title: SEC () Delete
Name: STODDARD, TRICIA
Address: 912 20TH PLACE
City-St-Zip: VERO BEACH, FL 32960 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: STODDARD, NICHOLAS
Address: 126 43RD AVENUE
City-St-Zip: VERO BEACH, FL 32968 US

Title: SEC (X) Change () Addition
Name: STODDARD, TRICIA
Address: 126 43RD AVENUE
City-St-Zip: VERO BEACH, FL 32968 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICHOLAS STODDARD

PD

02/15/2006

Electronic Signature of Signing Officer or Director

Date