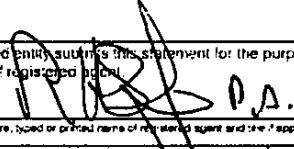
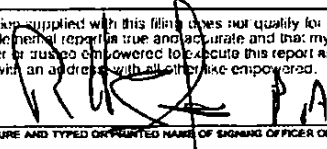


FILED
Apr 27, 2007 8:00 am
Secretary of State

04-11-2007 90040 014 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P06000033712			
1. Entity Name RICK'S CORAL REEF CREAMERY CORP.			
Principal Place of Business 91500 OVERSEAS HWY KEY LARGO, FL 33070		Mailing Address 298 SOUTH COCONUT PALM BLVD ISLAMORADA, FL 33070	
2. Principal Place of Business - No P.O. Box # 91296 OVERSEAS HWY		3. Mailing Address Suite, Apt. #, etc.	
City & State Tavernier FL		City & State	
Zip 33070		Country	
4. FEI Number 84-1705236		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHARI OLEFSON, PA 15 SE 9TH AVE FORT LAUDERDALE, FL 33301		7. Name and Address of New Registered Agent 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:  P.A. DATE: 4-6-07			
FILE NOW!!! FEES \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
PRES STANGER, RICK 298 SOUTH COCONUT PALM BLVD ISLAMORADA, FL 33070			
SEC STANGER, DEBORAH 298 SOUTH COCONUT PALM BLVD ISLAMORADA, FL 33070			
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 697, 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:  P.A. DATE: 4-6-07			