


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000028602

1. Entity Name
DE RIDDER CORPORATION



Principal Place of Business
4406 S.W. 132ND PLACE
MIAMI, FL 33175

Mailing Address
4406 S.W. 132ND PLACE
MIAMI, FL 33175

DO NOT WRITE IN THIS SPACE



01202006 No Chg-P CRZE034 (11/05)

4. FEI Number
65-0494664 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

DE RIDDER, PHILIPPE
4406 S.W. 132ND PLACE
MIAMI, FL 33175

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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 _____ DATE _____
Signature, typed or printed name of registered agent and fee if applicable NOTE: Registered Agent signature required when reappointing

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DE RIDDER, PHILIPPE
STREET ADDRESS	4406 S.W. 132ND PLACE
CITY - ST - ZIP	MIAMI, FL 33175
TITLE	D
NAME	DE RIDDER, MARCELLA
STREET ADDRESS	4406 S.W. 132ND PLACE
CITY - ST - ZIP	MIAMI, FL 33175
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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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 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: *x Philippe De Ridder* **Philippe De Ridder** 02/10/06 (305) 552 7617

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR