2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000038197

SUDBURY, MA 01776

City-St-Zip:

Entity Name: RUBY, INC.

FILED Mar 13, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
P.O. BOX BOCA RA	823 TON, FL 33429 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
P.O. BOX BOCA RA	823 TON, FL 33429 US			
FEI Number	: 65-0663220 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address of	New Registered Agent:	
105 WATE	NE, GEORGE ERVIEW WAY ALM BEACH, FL 33411 US			
	e named entity submits this statement for the e of Florida.	e purpose of changing its registered	I office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered A	gent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () Delete LAYSON, JAMES W 207 TROPIC ISLE DRIVE, #103 DELRAY BEACH, FL 33483	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () Delete JASPON, SCOTT 9743 ARBOR MEADOW DRIVE BOYNTON BEACH, FL 33483	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	STD () Delete DE SIMONE, GEORGE 105 WATERVIEW WAY ROYAL PALM BEACH, FL 33411	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () Delete ZUCKERMAN, CRAIG 86 CIDER MILL ROAD	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: CRAIG ZUCKERMAN D 03/13/2006