2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V56949

Entity Name: RICARTIN, INC.

FILED Jul 21, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

(X) Change () Addition

PRFS

ACCT

LUBKE, JOHN

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

DEPASS, RICHARD L

417 NW 10 TERRACE

HALLANDALE, FL 33009

1939 WAUKEGAN ROAD

GLENVIEW, IL 60025

Current Principal Place of Business: New Principal Place of Business:

425 S. HUBBARDS LANE
SUITE 407
LOUISVILLE, FL 40207

417 NW 10 TERRACE
HALLANDALE, FL 33009

Current Mailing Address: New Mailing Address:

425 S. HUBBARDS LANE
SUITE 407
LOUISVILLE, FL 40207

417 NW 10 TERRACE
HALLANDALE, FL 33009

FEI Number: 36-3846060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEPASS, ISABEL
417 NW 10TH TERRACE
HALLANDALE, FL 33009 US

DEPASS, HELEN E
417 NW 10TH TERRACE
HALLANDALE, FL 33009 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: HELEN E DEPASS 07/21/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete Title: Name: DEPASS, RICHARD, Name:

Name: DEPASS, RICHARD,
Address: 12702 BARRETT DR
City-St-Zip: TAMPA, FL

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Title: D () Delete
Name: LUBKE, JOHN

Address: 1939 WAUKEGAN ROAD City-St-Zip: GLENVIEW, IL 60025

Title: SECT () Change (X) Addition

 Name:
 Name:
 DEPASS, HELÉN E

 Address:
 Address:
 417 NW 10 TERRACE

 City-St-Zip:
 City-St-Zip:
 HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD L DEPASS PRES 07/21/2004