

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

95 APR 11 PH 9:41

**DOCUMENT # 533509 (6)**

1. Corporation Name  
**RICHLAND MILLS, INC.**

Principal Place of Business Mailing Address  
**3985 EAST TENTH COURT HALEAH FL 33013**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **05/06/1977** 3a. Date of Last Report **06/14/1994**

4. FEI Number **59-1735873** Applied For  Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country 29 Zip Country 30 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HERMELEE, BRUCE G. ESQ.  
100 SE 2ND STREET  
MIAMI, 33131**

81 Name **James A. Marx, Esq.**  
82 Street Address (P.O. Box Number is Not Acceptable) **Miami Center-Suite 340**  
83 **201 S. Biscayne Blvd.**  
84 City **Miami** FL 85 Zip Code **33131**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the provisions of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **JAMES MARX** DATE **4-5-95**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>PD</b>
NAME	<b>WOLF, RICHARD B.</b>
STREET ADDRESS	<b>625 BILTMORE WAY</b>
CITY-ST-ZIP	<b>CORAL GABLES FL</b>
TITLE	<b>TS</b>
NAME	<b>ALMIRAL, JOSE</b>
STREET ADDRESS	<b>1635 S.W. 84 AVENUE</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	<b>V</b>
NAME	<b>OGAZA, CARMEN</b>
STREET ADDRESS	<b>8261 N.W. 188 ST.</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	<b>D</b>
NAME	<b>POPLIN, KELLY</b>
STREET ADDRESS	<b>1009 CORDOVA RD.</b>
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>
TITLE	<b>V</b>
NAME	<b>NICHOLSON, KEITH</b>
STREET ADDRESS	<b>1058 CREEKFORD DRIVE</b>
CITY-ST-ZIP	<b>FT LAUDERDALE FL</b>
TITLE	<b>D</b>
NAME	<b>WALTER, GEROLD</b>
STREET ADDRESS	<b>8 FAWN HILL CT.</b>
CITY-ST-ZIP	<b>RAMSEY NJ</b>

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>D</b>
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>D</b>
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>13000 N.W. 45th Ave.</b>
4.3 STREET ADDRESS	<b>Opa-Locka, Florida 33054</b>
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	<b>D</b>
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	<b>NONE</b>
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *[Signature]* **RICHARD B. WOLF** DATE **4-5-95** (305) 836-5826