

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000000872

1. Entity Name

RICH KIDS, LTD.

FILED

00 MAY 10 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
2357 N.E. 28TH COURT
LIGHTHOUSE POINT FL 33064

Mailing Address
2357 N.E. 28TH COURT
LIGHTHOUSE POINT FL 33064-8237

2. Principal Place of Business

3. Mailing Address

1600 U.S. Hwy 64 W #237

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Sapphire NC

4. FEI Number 65-0663104

Applied For

Not Applicable

Zip

Country

Zip

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DRIVE, #500 EAST
WEST PALM BEACH FL 33401

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record. \$3,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P96000037799
NAME RKL, CORP.
STREET ADDRESS 2357 N.E. 28TH COURT
CITY - ST - ZIP LIGHTHOUSE POINT FL 33064

STREET ADDRESS 1600 US Hwy 64 W #237
CITY - ST - ZIP Sapphire NC 78774

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Signature P. R. K. Corp. Pres. P. R. K. Corp 4/10/00 828/862-5940
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #