FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L31031

RIC & KATHY'S, INCORPORATED

COCONUT CREEK FL 33066

9. 3.	建筑成为自由城市		
Principal	Mailing		
670 NW 42	2ND AVE	670 NM	

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90104 040 ***150.00

I LANGUARI NEU 1888) BLORG ARONG ARONG BIRDS BIRGS NOBEL CENTRA CENTRA CENTRA CONTRACTOR AL PROPERTO DE CONTRACTOR DE CONTRACTOR

· 其具性情義者的問題的[1] · · · · · · · · · · · · · · · · · · ·						
Principal Place of Business	Mailing Address	- 111- <u>4</u>		IS DADSI DIDII OSBII DIBII OSBIS IORI -		
670 NW 42ND AVE COCONUT CREEK FL 33066 US	670 NW 42ND AVE COCONUT CREEK FL 33066 US	COCONUT CREEK FL 33066		IS SPACE		
		Date Incorporated or Qualifed 11/21/1989				
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		65-0221980	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 24 : 25	Zip Co 29 , 30	untry	This corporation owes the current year Personal Property Tax.	ntangible ☐ Yes ☐ No		
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
COLEMAN, RICHARD J.		81 Name		\$\$\$\displaystyle{\pi}\$		
		82 Street Addr	2 Street Address (P.O. Box Number is Not Acceptable)			

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

83 84 City

agent. i a	m familiar with, and accept the obligations	of, Section 607.0505, Flori	da Statutes.			
SIGNATURE	. Signature, typed or printed name of registered agent and to	title if posticable (NOTE: I	Registered Agent signature require	dbas -ci-station	DATE	· ·
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO		RS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE		☐ Change	Addition
NAME	COLEMAN, RICHARD J.		1.2 NAME		_,	_
STREET ADDRESS	670 NW 42ND AVE		1.3 STREET ADDRESS			
CITY-ST-ZIP	COCONUT CREEK FL		1.4 CITY-ST-ZIP		· ;'•	
TITLE	VSD	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	COLEMAN, KATHRYN H.		2.2 NAME			
STREET ADDRESS	670 NW 42ND AVE		2.3 STREET ADDRESS		· · · · ·	
CITY-ST-ZIP	COCONUT CREEK FL		2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS	•		3.3 STREET ADDRESS			
CITY-ST-ZIP	•		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			ł
TITLE	•	☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	·		5.4 CITY-ST-ZIP	_	·	·
MILE		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		~	1
CITY-ST-ZIP			6.4 CITY-ST-ZIP		•	

I hereby certify that the information sepplied 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 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 changes of an attachment with an address, with all other like empowered.

SIGNATURE:

954-970-0680

Zip Code