

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101664

Entity Name: RICHMOND HEIGHTS PROMENADE CORPORATION**Current Principal Place of Business:**14700 BOOKER T. WASHINGTON BLVD.
MIAMI, FL 33176**Current Mailing Address:**P.O. BOX 163434
MIAMI, FL 33116**FEI Number:** 65-0771573**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MERIT, PATRICK A
14700 BOOKER T. WASHINGTON BLVD.
MIAMI, FL 33176 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	MERIT, PATRICK A
Address	11401 SW 147TH STREET
City-State-Zip:	MIAMI FL 33176

Title	DIRECTOR
Name	BETHEL, CHARLES
Address	PO BOX 163434
City-State-Zip:	MIAMI FL 33116

Title	ST
Name	BROWN, FRIEDA
Address	PO BOX 163434
City-State-Zip:	MIAMI FL 33116

Title	VP
Name	WEBB, KAREN
Address	PO BOX 163434
City-State-Zip:	MIAMI FL 33116

Title	DIRECTOR
Name	BECKFORD, MARK
Address	PO BOX 163434
City-State-Zip:	MIAMI FL 33116

Title	DIRECTOR
Name	GORE, JOHN
Address	PO BOX 163434
City-State-Zip:	MIAMI FL 33116

I hereby 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 all other like empowered.

SIGNATURE: FRIEDA BROWN**SECRETARY/TREASURER** 05/01/2020_____
Electronic Signature of Signing Officer/Director Detail_____
Date