

Amended \$ 61.25

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

FILED
Jul 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 156117
1. Corporation Name
RICH ELECTRONICS, INC.

Principal Place of Business: 3300 N W 21st Street MIAMI FL 33142
Mailing Address: SAME

"AMENDED"

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 3300 NW 21 St Miami FL 33142	26 SAME
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 MIAMI FL	28 MIAMI FL
24 33142	29 USA
25 USA	30

3. Date Incorporated or Qualified 10/01/48	4. FEI Number 59-0592743	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
ROBERT S. RICH, JR.
3300 NW 21 Street
MIAMI FL 33142

10. Name and Address of New Registered Agent

81 Name	Robert S. Rich, Jr.
82 Street Address (P.O. Box Number is Not Acceptable)	3300 NW 21 street
83 City	Miami
84 State	FL
85 Zip Code	33142

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Robert S. Rich, Jr.* (NOTE: Registered Agent must sign and print name) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	President	<input type="checkbox"/> DELETE
NAME	Robert S. Rich, Sr.	
STREET ADDRESS	3300 NW 21 Street	
CITY-ST-ZIP	Miami FL 33156	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	Robert S. Rich, Sr.	
STREET ADDRESS	3300 NW 21 Street	
CITY-ST-ZIP	Miami FL 33142	
TITLE	Secretary Treas	<input type="checkbox"/> DELETE
NAME	Sarah W. Rich	
STREET ADDRESS	3300 NW 21 St	
CITY-ST-ZIP	Miami FL 33142	
TITLE	VP Director	<input checked="" type="checkbox"/> DELETE
NAME	Philip W. Rich	
STREET ADDRESS	3300 NW 21 St	
CITY-ST-ZIP	Miami FL 33142	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	VP PHILIP W. RICH	
43 STREET ADDRESS	3300 NW 21 ST	
44 CITY-ST-ZIP	MIAMI FL 33142	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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 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: *Robert S. Rich, Jr.* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE: _____ DAYTIME PHONE: _____

CR2E034 (10/97)