


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

FILED
Mar 26 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 # **194914** (8)
1. Corporation Name
HARRY RICH CORP.



Principal Place of Business	Mailing Address
HARRY RICH CORP. 5280 NW 167TH ST MIAMI LAKES FL 33014 US	HARRY RICH CORP. 5280 NW 167TH ST MIAMI LA 33014 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21 12349 S.W. 53 Street	26 12349 S.W. 53 Street	07/27/1956	59-0776621	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22 Suite 201	27 Suite #201	<input checked="" type="checkbox"/> 8.75		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23 Cooper City, FL	28 Cooper City, FL	<input type="checkbox"/>		
Zip	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
24 33330	25 USA	29 33330	30 USA	

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEMET, BARRY N.
201 ALHAMBRA CIRCLE, 12TH FLOOR
CORAL GABLES FL 33134

81 Name	Barry N. Semet
82 Street Address (P.O. Box Number is Not Acceptable)	100 S.E. Second Street
83	17th Floor
84 City	Miami
85 Zip Code	FL 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICH, HARRY	1.2 NAME	
STREET ADDRESS	5280 NW 167TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICH, DAVID	2.2 NAME	
STREET ADDRESS	5280 NW 167TH ST	2.3 STREET ADDRESS	12349 S.W. 53 Street
CITY-ST-ZIP	HIALEAH FL	2.4 CITY-ST-ZIP	Cooper City, FL 33330
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICH, LAWRENCE	3.2 NAME	
STREET ADDRESS	5280 NW 167TH ST	3.3 STREET ADDRESS	12349 S.W. 53 Street
CITY-ST-ZIP	HIALEAH FL	3.4 CITY-ST-ZIP	Cooper City, FL 33330
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVINSON, LAURIE RICH	4.2 NAME	
STREET ADDRESS	5280 NW 167TH ST	4.3 STREET ADDRESS	12349 S.W. 53 Street
CITY-ST-ZIP	MIAMI LAKES FL	4.4 CITY-ST-ZIP	Cooper City, FL 33330
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICH, NAN H.	5.2 NAME	
STREET ADDRESS	5280 NW 167 STREET	5.3 STREET ADDRESS	12349 S.W. 53 Street
CITY-ST-ZIP	HIALEAH FL	5.4 CITY-ST-ZIP	Cooper City, FL 33330
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

CR2E034 (10/97)