CAPITAL CONNECTION 850 222 1222 07/01 '02 14:42 NO.921 01/01

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 293558

1. Entity Name:

RICHMOND ENTERPRISES, INC.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
~~14200 SW 72nd Avenue~~	~~14200 SW 72nd Avenue~~
~~Suite Address~~	~~Suite Address~~
11350 Dunbar Dr.	11350 Dunbar Dr.
City & State: Miami, Florida 33158	City & State: Miami, Florida
Zip: 33158 Country: USA	Zip: 33158 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 591116449 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: LINKSTON T. CRYER

Street Address (P.O. Box Number is Not Acceptable): 14200 SW 72nd Avenue

City: Miami **FL** Zip Code: 33158

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: Linkston T. Cryer LINKSTON T. CRYER, PRESIDENT 7/2/02

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: President NAME: LINKSTON T. CRYER STREET ADDRESS: 14200 SW 72nd Avenue CITY-ST-ZIP: Miami, Florida 33158	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE: Vice-President NAME: Willie L. Redding STREET ADDRESS: 14620 Polk St. CITY-ST-ZIP: Miami, Florida	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE: Secretary NAME: Elizabeth A. Cryer STREET ADDRESS: 14200 SW 72nd Avenue CITY-ST-ZIP: Miami, Florida 33158	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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13. 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 or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Linkston T. Cryer Linkston T. Cryer, President 7/2/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

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