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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 643094

1. Corporation Name

| RICHLIN | I INVESTMENT CO., INC | • | | | | | | | | | | |
|---|---|-----------------------|---------------------|--------------------|--------------------|----------------------|---------|---------------------|---|----------|-------------|---------------|
| Principal Plac | e of Business | Ma | lling Address | | | | ┪ | | | | | |
| 3110 BELMAR STREET 3110 BELMAR STREET | | | | | | | | | | | | |
| FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304 | | | | | | | | DO NOT MIDITE IN TH | 110 CD A C | ·E | | |
| | | | | | | | | | DO NOT WRITE IN TH Date Incorporated or Qualifed | IIS SPAC | ,E | |
| | | | | | | | 3. | | 10/25/1979 | | | |
| a Demand F | Place of Business | | Mailing Address | | _ | | 4 | | El Number | 7 | A | plied For |
| - i | ridce of positiess | 26 | Maling Address | | | | 1 | | 59-1948175 | 1 | | ot Applicable |
| Suite, Apt. | # etc | | Suite, Apt. #, etc. | | | | | | | \$8 | | Additional |
| 22 | . 11, 0.0. | 27 | | | | | 5. | i. (| Certifcate of Status Desired | | ee Re | equired |
| City & Sta | te | | City & State | | | | 6. | . E | lection Campaign Financing | \$ | 5.00 | May Be |
| 23 | | 28 | | _ | | | | 1 | Trust Fund Contribution | Δ | dded | to Fees |
| Zip | Country | | Zip | Cour | itry | | 8. | i. 7 | This corporation owes the current year | | | |
| 24 | 25 | 29 | | 30 | | | _ | | Personal Property Tax. | Y | | □No |
| | 9. Name and Address of C | urrent Regist | ered Agent | | | | 10. |). I | Name and Address of New Register | ed Agent | _ | |
| 101 | IEC DICUADO | | | | 81 | Name | | | | | | |
| | ies, Richard 0 Belmar street | | | ľ | 82 | Street Add | ress (F | P.(| Box Number is Not Acceptable) | | | |
| | RT LAUDERDALE FL 33304 | | | ŀ | 00 | | | | | | | |
| rur | I LAUDENDALE LE 22204 | | | | 83 | | | | | | | |
| | | | | 1 | 84 | City | | | F | 85 | Zip | Code |
| | | | | | | <u> </u> | | | submits this statement for the purpose | | ing its | registered |
| office or | registered agent, or both, in the sam familiar with, and accept the c | State of Florid: | a. Such change was | authorized | DV | the corporati | on's b | ooa | ard of directors. I hereby accept the ap | pointmen | tas re | gistered |
| SIGNATURE | Signature, typed or printed name of registers | ad agent and fille if | apolicable (NOT | E Registered / | Agen | it signature require | d when | ı reii | nstating) DATE | | | |
| 12. | | S AND DIREC | | 13. | - | | | | DDITIONS/CHANGES TO OFFICERS | AND DIF | RECTO | ORS IN 12 |
| TITLE | PD | | ☐ DELETÉ | 1 1 TITI | LΕ | | | | | C | hange | ☐ Addition |
| NAME | JONES, RICHARD | | | 12 NA | ME | | | | | | | |
| STREET ADDRESS | 3110 BELMAR STREET FT.LAUDERDALE FL | | | 13 STF | STREET ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | | 14 CiT | Y-\$ | -ST-ZIP | | | | | | |
| TITLE | VST | VST DELETE | | | LE | | | | | | hange | Addition |
| NAME | JONES, LINDA | | | | ME | иE | | | | | | |
| STREET ADDRESS | 3110 BELMAR STREET | | | | 2.3 STREET ADDRESS | | | | | | | |
| CITY-ST-ZIP | FT LAUDERDALE FL | | | 2 4 CI | ry-s | 5T-2IP | | | | | _ | <u>-</u> |
| TITLE | ☐ DELETE | | | 3 1 TIT | LE | | | | | ∐c | hange | Addition |
| NAME | | | | 3 2 NA | ME | | | | | | | |
| STREET ADDRESS | 5 | | | 3 3 STF | REET | T ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | 34 CI | | ST- ZIP | | | | | | - Addition |
| TITLE | | | ☐ DELETÉ | 4 1 TITI | | | | | | Пс | hange | Addition |
| NAME | | | | 4 2 NA | ME | | | | | | | |
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| NAME | | | | 5 2 NA | | TADDRECC | | | | | | |
| STREET ADDRESS | 8 | | | | | TADDRESS | | | | | | |
| CITY-ST-ZIP | | | ☐ DELETE | 5 4 C1T 6 1 TIT | | 11-41 | | | | | hange | Addition |
| TITLE | | | | 0 1 111 | | | | | | √ ليبا √ | yu | |
| | | | | 62846 | ME | + | | | | | | į |
| NAME | | | | 62 NA | | T ADDRESS | | | | | | |

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, with all other like empowered.

6 4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90011 007 *****8.75 03-17-1999 90011 008 ***150.00