

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathias
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **681852** (0)
1. Corporation Name
RICHARDS FABRICS, INC.



Principal Place of Business Mailing Address
13876 W.DIXIE HWY NO.MIAMI FL 33161 **13876 W.DIXIE HWY NO.MIAMI FL 33161**

2. Principal Place of Business 2a. Mailing Address
21 State, Apt. #, etc. 26 State, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country 30 Country
9. Name and Address of Current Registered Agent

**MILITANA, JOHN, ESQ.
8801 BISCAYNE BLVD.
MIAMI FL 33138**

3. Date Incorporated or Qualified **08/12/1980** 3a. Date of Last Report **05/16/1995**
4. FEIN Number **59-2025113** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 607.0405, Florida Statutes.

SIGNATURE _____ Date Registered Agent (month, day, year) _____

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
SD RICHARD, FOUAD 13886 W DIXIE HWY NORTH MIAMI FL
PD RICHARD, MARIE 13886 W DIXIE HWY NORTH MIAMI FL
[] DELETE [] DELETE
[] DELETE [] DELETE
[] DELETE [] DELETE
[] DELETE [] DELETE
[] DELETE [] DELETE
[] DELETE [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE [] Change [] Addition
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP [] Change [] Addition
5. TITLE [] Change [] Addition
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP [] Change [] Addition
9. TITLE [] Change [] Addition
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP [] Change [] Addition
13. TITLE [] Change [] Addition
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP [] Change [] Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption statute in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement 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 register 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: *Marie Claude Richard* **MARIE C RICHARD Pres 3/27/94 305-895-2120**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)