

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000003538

FILED
Apr 05, 2003
Secretary of State

Entity Name: R.C.H. DIVERSIFIED ENTERPRISES INC.

Current Principal Place of Business:

1580 SAWGRASS CORPORATE PKWY,
SUITE 130
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

1580 SAWGRASS CORPORATE PKWY,
SUITE 130
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 88-0495958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, A
8765 FOREST MILLS BLVD
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: MURPHY, C
Address: 3305 WESY SPRING MOUNTAIN RD, STE 60-24
City-St-Zip: LAS VEGAS, NV

Title: S () Delete
Name: LEE, S
Address: 3305 WESY SPRING MOUNTAIN RD, STE 60-24
City-St-Zip: LAS VEGAS, NV

Title: T () Delete
Name: SOUTAR, M
Address: 3305 WESY SPRING MOUNTAIN RD, STE 60-24
City-St-Zip: LAS VEGAS, NV

Title: D () Delete
Name: WHYTE, J
Address: 3305 WESY SPRING MOUNTAIN RD, STE 60-24
City-St-Zip: LAS VEGAS, NV

Title: T () Delete
Name: SIMMONS, C
Address: 3305 WESY SPRING MOUNTAIN RD, STE 60-24
City-St-Zip: LAS VEGAS, NV

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: MURPHY, C
Address: 3305 WEST SPRING MOUNTAIN RD, STE 60-24
City-St-Zip: LAS VEGAS, NV

Title: S (X) Change () Addition
Name: LEE, S
Address: 3305 WEST SPRING MOUNTAIN RD, STE 60-24
City-St-Zip: LAS VEGAS, NV

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WEEKS, R
Address: 3305 WESY SPRING MOUNTAIN RD, STE 60-24
City-St-Zip: LAS VEGAS, NV

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SLEE

S

04/05/2003

Electronic Signature of Signing Officer or Director

Date