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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

G01951

(4)

DOCUMENT #
1. Corporation Name

RICH MILLWORK CORP.					
Principal Place of	Business	Mailing Address			IR) MINIT NINIT NINIT NENT NINIT NINIT INNI
98 N.W. 29TH STREET MIAMI FL 33127		98 N.W. 29TH STF MIAMI FL 33127	EET		
				09/29/1982	a. Date of Last Report 04/28/1995
2. Principal Place	e of Business	2a. Mailing Address 26		4. FEI Number 59-1098944	Applied For Not Applicable
Suite, Apt. #, 6	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip 29	Country 30	8. This corporation has liability for intar	
24	9. Name and Address of Curre			10. Name and Address of New Regi	stered Agent
RICH, H			81 Name 82 Street Add	ress (P.O. Box Number is Not Acceptable)	
98 N.W. 29TH STREET MIAMI FL			83		
MIAMI F	L		84 City		B5 Zip Code
				oration submits this statement for the purposed of directors. Thereby accept the appoint	FL S Z S S S S S S S S
or registered familiar with,	I agent, or both, in the State of Flor and accept the obligations of, Sec and the printed agent of registered agen	ction 607.0505, Florida Statu	rized by the corporation is bookes. (NOTE: Registered Agent signature require)	eo when reinstating.	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PD	DELETE	1 1 TITLE	·	☐ Change ☐ Addition
NAME	RICH, HOWARD		1.2 NAME		
STREET ADDRESS	20320 NE 20TH CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	N. MIAMI BCH. FL		1.4 CITY - ST - ZIP		☐ Charge ☐ Addition
1131.5	V	☐ DELETE	2. 1 TITLE		Charge Notition
NAME	RICH, HELENE		2 2 NAME		
STREET ADDRESS	11750 S.W. 97TH AVE.		2.3 STREET ADDRESS		
C-TY-ST-ZiP	MIAMI FL	DELETE	2.4 CITY - ST - ZIP 3 1 TITLE		☐ Charge ☐ Addition
TITLE		<u></u>	3.2 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CHY-S1-ZIP			3.4 CHTY-ST-ZIP		
TITLE		DELETE	4 1 TITLE		Change Addition
NAME			4.2 NAME		
STHEET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Finction	4.4 CITY - ST - ZIP		Change Addition
TIFLE		DELETE	5 1 TITLE		☐ e åp ☐
NAME			5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP		DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME		-	6.2 NAME		
STREET ADDRESS		,	63 STREET ADDRESS		
		<i></i>	64 CITY-ST-ZIP		1000 First District Control
14. I do hereby certify that	certify that the information supplie the information indicated on this ar am an officer or director of the cor Block 12 or Block 13 if changed, c	nnual report of supplemental poration of the receiver of the	istee enhowered to execute t	y for the exemption stated in Section 119.07 grate and that my signature shall have the sa this report as required by Chapter 607, Flori	(13)(k), Horida Statutes, 1 further ame legal effect as if made under da Statutes; and that my name

SIGNATURE: HOWARD RICH

FICER OF DIRECTOR

-96 (305) 573-9142