**FILED** 

Mar 25, 1999 8:00 am Secretary of State

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # G01953**

1. Corporation Name

RICH STAIRWAYS CORP.

Principal Place	e of Business	Mailing Address				0(0() 3)B\$( 0)0() 3	
% HOWARD RICH 98 N.W. 29TH ST. MIAMI FL 33127		% HOWARD RICH 96 N.W. 29TH ST. MIAMI FL 33127		DO NOT WRITE IN THI	S SPACE		
					3. Date Incorporated or Qualifed 09/29/1982		
Principal Place of Business     2a. Mailing Address					4. FEI Number	<del> </del>	plied For
21	26				59-1098944		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired	<b>\$8.75</b> A	
24	27						<del></del>
		City & State	28		6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution  \$5.00 May Be Added to Fees		
Zip 24	Country Zip 29 30		Country	8. This corporation owes the current year Intangible Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent		,	10. Name and Address of New Registered	d Agent	
5161	LIOUANO		81	Name			ļ
rich, howard 98 n.w. 29th St.			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33127			83				1
			84	City	FI	85 Zip C	Code
affina ar r	egistered agent, or both, in the State on m familiar with, and accept the obligat	of Florida. Such change was autrions of, Section 607.0505, Florid	orized by a Statutes	the corporat	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoint	omment as reç	registered gistered
	Signature, typed or printed name of registered agent		13,	nt signature requir	ADDITIONS/CHANGES TO OFFICERS A		IRS IN 12
TITLE			1.1 TITLE		ADDITIONS/CHANGES TO CITICENS A	Change	Addition
NAME	RICH, HOWARD						_
STREET ADDRESS				T ADDRESS			ļ
CiTY-ST-ZIP	N. MIAMI, BCH., FL.		1.4 CITY-S	f			
TITLE		☐ DELETE 2.1 TIT				Change	Addition
NAME							-
STREET ADDRESS			2.3 STREE	T ADDRESS			]
CITY-ST-ZIP	2.41		2.4 CITY-5	ST-ZIP	<u> </u>	to Their go	
TITLE			3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				,
STREET ADDRESS			3.3 STREE	TADDRESS			}
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		3.4. CITY-5	ST-ZIP			
TITLE	•	☐ DELETE	4.1 TITLE			Change	Addition
NAME	·		4. 2 NAME				
STREET ADDRESS				TADORESS			}
CITY-ST-ZIP		——————————————————————————————————————	4.4 CITY-S	T-ZIP			Addition
TITLE	;	DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME	T ADDRESS	•	•	
STREET ADDRESS	· ,		■ 0.3 STREE	- VDDUE99			
CITY-ST-ZIP			EACITY O	T. 710   '	No.		l
		□ nci ete	5.4 CITY-S	T-ZIP		[] Change	Addition
TITLE مديو NAME		☐ DELETE	5.4 CITY-S 6.1 TITLE 6.2 NAME	T-ZIP		Change	☐ Addition

14. I hereby certify that the information supplied with this thing 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 suppliemental 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 of 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 of the corporation of the receiver of trustee empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

HOWARD RICH LYUNGE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-573-9142

Daytime Phone #