FILED
Apr 16, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G60618

1. Entity Name
RICHARD BOYD ENTERPRISES, INC.

Principal Place of Business	Mailing Address
1670 NE 205 TERR N MIAMI BEACH, FL 33179 US	20820 NE 12 COURT % RICHARD C. BOYD N MIAMI BEACH, FL 33179 US

03302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2350842
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BOYD LINDA G
20820 NE 12 COURT
N. MIAMI BEACH, FL 33179

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

U00000115933
04/16/04-80044-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	BOYD, LINDA G
STREET ADDRESS	20820 NE 12 COURT
CITY-ST-ZIP	N. MIAMI BEACH, FL
TITLE	DV
NAME	BOYD, MATTHEW
STREET ADDRESS	20820 NE 12 COURT
CITY-ST-ZIP	N. MIAMI BEACH, FL
TITLE	DV
NAME	GOMES CHARLES
STREET ADDRESS	10719 SW 104 ST
CITY-ST-ZIP	MIAMI, FL
TITLE	DV
NAME	BOYD, EREN A
STREET ADDRESS	20820 NE 12 CT.
CITY-ST-ZIP	N. MIAMI BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Linda G Boyd 3/21/04 3056512496
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #