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Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **K54854** (0)

1. Corporation Name
RIKKI DAVIS, INC.

Principal Place of Business
**1323 S.E. 17TH ST. SUITE #209
FORT LAUDERDALE FL 33316**

Mailing Address
**1323 S.E. 17TH ST. SUITE #209
FORT LAUDERDALE FL 33316-1707**



3. Date Incorporated or Qualified **12/22/1988** 3a. Date of Last Report **03/08/1996**

4. FEI Number **65-0094729** 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

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. State, Apt. #, etc.

27. City & State

28. Zip

29. Country

30. Country

9. Name and Address of Current Registered Agent

**DAVIS, RIKKI
801 N.E. 1ST ST. #1
FORT LAUDERDALE FL 33301**

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 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent or the registered agent's authorized representative (if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
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CITY-STATE-ZIP
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TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**DPS
DAVIS, RIKKI
801 N.E. 1ST STREET, #1
FORT LAUDERDALE FL**

☐ DELETE

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☐ DELETE

☐ DELETE

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE
12. NAME
13. STREET ADDRESS
14. CITY-STATE-ZIP
2.1. TITLE
2.2. NAME
2.3. STREET ADDRESS
2.4. CITY-STATE-ZIP
3.1. TITLE
3.2. NAME
3.3. STREET ADDRESS
3.4. CITY-STATE-ZIP
4.1. TITLE
4.2. NAME
4.3. STREET ADDRESS
4.4. CITY-STATE-ZIP
5.1. TITLE
5.2. NAME
5.3. STREET ADDRESS
5.4. CITY-STATE-ZIP
6.1. TITLE
6.2. NAME
6.3. STREET ADDRESS
6.4. CITY-STATE-ZIP

☐ Change ☐ Addition

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14. I do 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 annual report or supplemental 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

3/10/97 9547613237

Date

Daytime Phone #

0275817

CR2E034 (9/96)