Apr 17, 2002 8:00 am Secretary of State 04-17-2002 90096 021 ***150.00

2002 Uniform Business Report (UBR)

K54854

DOCUMENT # 1. Entity 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									
2. Principal Place of Business			3. Mailing Address						(B)	I G ibil bigi bigi		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State			4.	. FEI Numbe	65-0094	729		Applied For Not Applicable	7
Zip Country			Zip	ntry					\$8.75 A	8.75 Additional ee Required		
	6. Name	and Address of Current R	egistered Agent	ı		7.		Address of N				1
5 					Name							7
	14 AVENUE				Street A	ddress (P.O.	. Box Numbe	r is Not Accep	table)		•	1
FORT LAUDERDALE FL 33301					City				F	Zip Co	ode	$\frac{1}{1}$
9. This corpo Tax filing r (See criter	FILE NOW! After May 1, 200	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 te Check Payable to Department of St.			10. Election Campaign Financing \$5.00 May Be							
11.		OFFICERS AND D	IRECTORS	12.		P	ADDITIONS/C	CHANGES TO	OFFICERS A	ND DIRECTO	R\$ IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLI NAM STRE		11105	PRES	SIDEN VURPI 14 th P ER DA	T LLAT VE #	Change	X Addition	1000
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	CITY						Change		1
NAME STREET ADDRESS CITY-ST-ZIP	a-51 v. 1	ಶೌರ್ಣ ಚರ್ವಾ	Delete	NAM STRE		. 40 - 10/20 4			ామా ఎజ్జ కాగ్రా	⊡ Change	☐ Addition.	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	li i						☐ Change	Addition	
IITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	III .				•		☐ Change	☐ Addition	
ITLE IAME Street address Stry-St-Zip			☐ Delete	II .						☐ Change	☐ Addition	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR