FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00							- FILED			
COF	PROFIT RPORATION UAL REPORT 1998			Sandra B. Secretary			Feb 03 Secret	1998	8:00	
DOCU 1. Corporatio RIFCO,	MENT #	K73548	}	(5)						
Principal Plac	e of Business		Mailing Add	ress						
% RICHARD I 25 SE 2ND A MIAMI FL 331	VENUE. SUITE 828			L. FOSMOEN AVENUE. SUITI 131	E 828		DO NOT 3. Date Incorporated or Qui	WRITE IN THIS	SPACE	· · · · · · · · · · · · · · · · · · ·
6 Delantal	Year of Distance		On Mailine A	44			03/10/1989		· · · · · · · · · · · · · · · · · · ·	
21 SS	Place of Business	951	2a. Mailing A	aaress Daliz	- 6000	-	4. FEI Number 65-0107399			pplied For lot Applicable
Suite, Apt.	#, etc.		Suite, Ap	t. #, etc.			5. Certificate of Status Desir	red 🔽	\$8.75	Additional
22 Th City & Stat	<u> </u>		27 City & Sta	125			6. Election Campaign Finan			tequired
23 /XL	404 1		28 /	A	1 Ec		Trust Fund Contribution			May Be to Fees
^{Zip} ろ(38 25	CASA	29 29	35.1	Country	1_	 This corporation owes or Personal Property Tax du 	e June 30.	☐ Yes [ntangible No
		Address of Current	Registered Age	nt O	81 Name		10. Name and Address of N	iew Registered	l Agent	
	MOEN, RICHARI SE 2ND AVE #8				82 Street	Addres	ss (P.O. Box Number is Not Ac	antable)		
	MI FL 33181	.20			LL 87	200	LE 69 ST	Gebranie)		
					83	· i2.	F			
					84 City,	16	A EN (FI	85 Zip	200° 205_
11. Pursuant office or r	to the provisions o registered agent, o	f Sections 607.0502 r both, in the State of d accept the obligat	and 607.1508, F of Florida, Such clions of Section 6	lorida Statute hange was au 07.0505. Flor	s, the above-named athorized by the conida Statutes.	d corpor rporation	ration supmits this statement fon's board of directors. I hereby	or the purpose of accept the ap	of changing pointment as	its registered registered
SIGNATURE										
12.	Signature, typed or printe	of registered agent OFFICERS AND		(NOTE:	Registered Agent signature 13.	re required	when reinstating) ADDITIONS/CHANGES TO	OFFICERS AN	D DIRECTO	RS IN 12
TITLE	D			DELETE	1.1 TITLE	T			Change	Addition
NAME	FOSMOEN, R				1.2 NAME	_				
STREET ADDRESS	35 SE 2ND A' MIAMI FL	VENUE			1.3 STREET ADDRESS	₹	00 NE 00 5	T =	<u>چ</u> ج	7130
CATY-ST-ZIP TATLE	MIAMI FL			DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	- 4	74- 17 LA	K& T	Change	☐ Addition
NAME				-	2.2 NAME				_ •	_
STREET ADDRESS					2.3 STREET ADDRESS					
CITY-ST-ZIP			·	L OF LETTE	2. 4 City-ST-ZIP	<u> </u>			0	f Addition
TITLE				DELETE	3.1 TITLE 3.2 NAME				Change	Addition
NAME STREET ADDRESS					3.3 STREET ADDRESS					
CITY-ST-ZIP	_				3.4. CITY-ST-ZIP					
TITLE				DELETE	4.1 TITLE				Change	Addition
NAME					4. 2 NAME					
STREET ADDRESS					4.3 STREET ADDRESS 4.4 CITY - ST - ZIP					
CITY-ST-ZIP TITLE	<u> </u>		Ţ	DELETE	5.1 TITLE	 			☐ Change	Addition
NAME					5.2 NAME			i i		
STREET ADDRESS					5.3 STREET ADDRESS					
CITY-ST-ZIP				DELETE	5.4 CITY-ST-ZIP	1			Change	Addition
TITLE				DELETE	6.1 TITLE	1			L. Griange	THE MODITION

64 CITY-ST-ZIP

14. 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 annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 chapted, or on an attachment with an address. 1/21/98 305 759 363 SIGNATURE:

6.2 NAME

NAME