

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M35456

Entity Name: R. CHIC CORP.

FILED  
Jan 28, 2009  
Secretary of State

## Current Principal Place of Business:

777 NW 72 AVE  
SUITE 2B2  
MIAMI, FL 33126 US

## New Principal Place of Business:

777 NW 72 AVE  
SUITE 2091  
MIAMI, FL 33126 US

## Current Mailing Address:

P. O. BOX 600231  
P. O. BOX 600231  
NORTH MIAMI BEACH, FL 33160 US

## New Mailing Address:

FEI Number: 59-2728049      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FREIRE, ROBERTO  
14550 S.W. 94TH LANE  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RIFAI, SAMMY,  
Address: 17500 N. BAY RD #707  
City-St-Zip: N. MIAMI BEACH, FL

Title: VPD ( ) Delete  
Name: RIFAI, TAMAM,  
Address: 17500 N. BAY RD #707  
City-St-Zip: N. MIAMI BEACH, FL

Title: ST ( ) Delete  
Name: RIFAI, ELAINE,  
Address: 17500 N. BAY RD #707  
City-St-Zip: N. MIAMI BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMMY RIFAI

PD

01/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date