


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90047 010 ***158.75

DOCUMENT # P02000127142	
1. Entity Name REAL ESTATE RICHES, INC.	

Principal Place of Business 608 POINSIETTA DRIVE VENICE FL 34285	Mailing Address 608 POINSIETTA DRIVE VENICE FL 34285
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2. Principal Place of Business 677 N. Washington Blvd. Suite, Apt. #, etc. # 116	3. Mailing Address Suite, Apt. #, etc.
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City & State Sarasota Florida	City & State
Zip 34236	Country USA

4. FEI Number 48-1287762	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GATSO, ELAINE M ESQ 1499 W PALMETTO PARK RD STE 210 BOCA RATON FL 33486

7. Name and Address of New Registered Agent Name <u>Jeffrey L. Rubin</u> Street Address (P.O. Box Number is Not Acceptable) <u>608 Poinsettia Drive</u> City <u>Venice</u> FL Zip Code <u>34285</u>

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 Jeffrey L. Rubin, President and Director **DATE** 3-25-04
(NOTE: Registered Agent Signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	<input type="checkbox"/> Delete	TITLE D/P/S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RUBIN, JEFFREY L		NAME Jeffrey L. Rubin	
STREET ADDRESS 10204 NW 5 ST		STREET ADDRESS 608 Poinsettia Drive	
CITY - ST - ZIP PLANTATION FL 33324-1642		CITY - ST - ZIP Venice FL 34285	
TITLE	<input type="checkbox"/> Delete	TITLE VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME James P. Toner	
STREET ADDRESS		STREET ADDRESS 10177 Luvonne Drive	
CITY - ST - ZIP		CITY - ST - ZIP N. Huntingdon PA 15642	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

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: Jeffrey L. Rubin **Jeffrey L. Rubin, President** **DATE** 3-25-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR