

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000007338

Entity Name: B.H. RICE, INC.

FILED
Apr 23, 2004
Secretary of State

Current Principal Place of Business:

2860 N.W. 135TH ST.
#118
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

2860 N.W. 135TH ST.
#118
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 65-0371595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMONT & NEIMAN, P.A.
2 SOUTH BISCAYNE BOULEVARD
SUITE 3550
MIAMI, FL 33131 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: RICE, DAVE
Address: 17300 NW 87TH AVE
City-St-Zip: HIALEAH, FL 330153516

Title: STD () Delete
Name: RICE-NADELE, PAMELA
Address: 130 RIVERWALK CR
City-St-Zip: SUNRISE, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RICE, DAVE
Address: 18551 NW 84TH COURT
City-St-Zip: HIALEAH, FL 330153516

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAMELA RICE NAEDELE

STD

04/23/2004

Electronic Signature of Signing Officer or Director

Date