FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000034460 (4)**

1. Corporation Name

MARK RICE RICHARDS, INC.

Principal Place of Business	Mailing Address
7559 NW 70 ST MIAMI FL 33166 US	7559 NW 70 ST MIAMI FL 33166 US

3. Date Incorporated or Qualified: 05/10/1993

3a. Date of Last Report: 01/26/1995

4. FEI Number: 65-0410664 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 2200 NW 102 Ave	26 2200 NW 102 Ave
22 Suite, Apt. #, etc. Bldg 3	27 Suite, Apt. #, etc. Bldg 3
23 City & State Miami FL	28 City & State Miami FL
24 Zip 33172 25 Country Dade	29 Zip 33172 30 Country Dade

9. Name and Address of Current Registered Agent

RICHARDS, MARK R
7559 NW 70 ST
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable) 2200 NW 102 Ave

83 Bldg 3

84 City Miami FL 85 Zip Code 33172

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	* 1 TITLE	☑ Change	☐ Addition
NAME	RICHARDS, MARK R		1 2 NAME		
STREET ADDRESS	7559 NW 70 ST		* 3 STREET ADDRESS	2200 NW 102 Ave - Bldg 3	
CITY-ST-ZIP	MIAMI FL		* 4 CITY-ST-ZIP	Miami FL 33172	
TITLE		☐ DELETE	2 1 TITLE	☐ Change	☐ Addition
NAME			2 2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 TITLE	☐ Change	☐ Addition
NAME			3 2 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		
CITY-ST-ZIP			4 4 CITY-ST-ZIP		
TITLE		☐ DELETE	5 1 TITLE	☐ Change	☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE	☐ Change	☐ Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 or supplemental annual 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 12 or Block 13 if changed or added by amendment with my address.

SIGNATURE: Mark R. Richards 2/21/96 3057165185

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #