FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000055260 (1) DOCUMENT # 1. Corporation Name

RETAIL INVESTMENT CONCEPTS, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Addre	oss					
4675 SW 74 ST 4675 SW 74 ST			\$T					
MIAMI FL 331	143	MIAMI FL 33	MIAMI FL 33143			DO NOT WRITE IN THIS SPACE		
							IN THIS SPACE	
						3. Date Incorporated or Qualified		
		1 4 44 77 4				07/25/1994		
	lace of Business	<u></u>	2a. Mailing Address			4, FEI Number		pplied For
Suite, Apt. #, etc.		[26]	Suite, Apt. #, etc.			65-0508462		ot Applicable
pooli g		— ¬	├ ¬			5. Certificate of Status Desired		Additional equired
22 City & State		Crty & Sta	City & State					
23		}¬ '	28			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip			Country					
24	25	29	30	 1		This corporation owes or has pa Personal Property Tax due June		No
#*	9. Name and Address of Cu					10. Name and Address of New Re		
PO	TAMKIN, ALAN H			81	Name			
	75 \$ W 74 ST							
	AMI FL 33143		82 Street Ad			dress (P.O. Box Number is Not Acceptab	le)	
ITHE	AMI 1 E 00 140			83				
				84	City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508. FI	orida Stalutes, the	e above	I e-named coi	rporation submits this statement for the p		its registered
office or ra agent. I a	egistered agent, or both, in the S m familiar with, and accept the of	tate of Florida. Such ch bligations of, Section 6	nange was author 07.0505, Florida S	ized by Statutes	the corpora s.	rporation submits this statement for the p ation's board of directors. I hereby accep	ot the appointment as	s registered
SIGNATURE	Signature, typed or printed name of registeres	d argent and title d applicable	(NOTE: Regis	tered Age	on: signature requ	uired when reinstating)	DATE	
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	RS IN 12
TITLE	D		DELETE 1	.1 TITLE		***************************************	Change	Addition
NAME	POTAMKIN, ALAN H		1	.2 NAME				
STREET ADDRESS	4 675 SW 74 ST		1	.3 STREET	ADDRESS			
CITY+ST-ZIP	MIAMI FL 33143		1	4 CITY-S	T-ZIP			1
TITLE			DELETÉ 2	.1 TITLE	ĺ		☐ Change	☐ Addition
NAME			5	2 NAME				ļ
STREET ADDRESS			2	.3 STREET	ADDRESS			
CITY-ST-ZIP				4 CITY-9	ST - ZIP			
TITLE	_	U	DELETE 3	A TITLE			L] Change	Addition
NAME			3	2 NAME				
STREET ADDRESS			3	3 STREET	ADDRESS			
CITY-ST-ZIP				4. CITY - S	ST-ZIP			
TITLE			DELETE 4	1 TITLE	Ì		☐ Change	Addition
NAME			4	. 2 NAME				
STREET ADDRESS			4	3 STREET	ADDRESS			
CITY-ST-ZIP				4 CITY-S	I - ZIP			
TITLE		Ц		.1 TITLE			☐ Change	☐ Addition
NAME				.2 NAME		ţ		
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP				4 CITY-S	it-ZIP		T ALLers	A 445/44
TITLE		L		.1 TITLE			Change	Addition
NAME				.2 NAME				
STREET ADDRESS					ADDRESS			ļ
CITY-ST-ZIP			1 6	4 CHY-S	T-7/P			

14. Thereby 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 and hal reports 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 corporation or the corporation or the corporation or the corporation of 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, continuously in an address.