## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000055260

Entity Name: RETAIL INVESTMENT CONCEPTS, INC.

FILED May 01, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2333 PONCE DE LEON BLVD., STE. 600 6600 COWPEN ROAD CORAL GABLES, FL 33134

200

MIAMI LAKES, FL 33014

**Current Mailing Address: New Mailing Address:** 

2333 PONCE DE LEON BLVD., STE. 550 6600 COWPEN ROAD CORAL GABLES, FL 33134

200

MIAMI LAKES, FL 33014

CHMN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

FEI Number: 65-0508462 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AUSTIN, MICHELLE M ESQ HICKEY, JOHN P ESQ 2333 PÓNCE DE LEON BLVD., STE. 550 6600 COWPEN ROAD

CORAL GABLES, FL 33134 200 MIAMI LAKES, FL 33014 US

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: JOHN P. HICKEY 05/01/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete Title: POTAMKIN, ALAN H Name:

POTAMKIN, ALAN H Name: 1 CASUARINA CONCOURSE 6600 COWPEN ROAD Address: Address: City-St-Zip: MIAMI LAKES, FL 33014

City-St-Zip: MIAMI, FL 33143

Title: Title: VΡ () Delete (X) Change ( ) Addition FARR, VERONICA Name: Name: PFEIFER, ANDREW

1 CASUARINA CONCOURSE 6600 COWPEN ROAD Address: Address: MIAMI, FL 33143 MIAMI LAKES, FL 33014 City-St-Zip: City-St-Zip:

Title: Title: ( ) Change (X) Addition () Delete T/S

YUSKO, DAVID Name: Name: 6600 COWPEN ROAD Address Address: City-St-Zip: City-St-Zip: MIAMI LAKES, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the 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.

VΡ SIGNATURE: ANDREW PFEIFER 05/01/2006