

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000031270 (8)

1. Corporation Name

GARFIELD RICHARDS, INC.

Principal Place of Business

12801 NW 27TH AVE T 221
MIAMI FL 33167

Mailing Address

19600 NW 11TH AVENUE
MIAMI FL 33169
US

FILED

97 SEP 15 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
3. Date Incorporated or Qualified		3a. Date of Last Report	
04/17/1995		07/26/1996	
4. FEI Number		Applied For	
65-0620722		Not Applicable	
5. Certificate of Status Desired		8.75 Additional Fee Required	
<input type="checkbox"/>		<input type="checkbox"/>	
6. Election Campaign Financing		5.00 May Be Added to Fees	
Trust Fund Contribution		<input type="checkbox"/>	
7. This corporation owes or has paid the current year Intangible		Personal Property Tax due June 30, <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
RICHARDS, GARFIELD 12801 NW 27TH AVE T 221 MIAMI FL 33167		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	1 RICHARDS, GARFIELD	1.1 TITLE	600002296386-6
NAME	12801 NW 27TH AVE T 221	1.2 NAME	-09/17/97--01127--001
STREET ADDRESS	MIAMI FL 33167	1.3 STREET ADDRESS	****165.00 ****165.00
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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 on any attachment with an address.

SIGNATURE:

Garfield Richards

9-13-97 (201) 650-3774

CR2E034 (4/97)

FLORIDA
DEPARTMENT of STATE

(2)

TO WHO IT MAY CONCERN,

I Garfield Richards did not
Recieve a first Notice of
This Corporation Report,
So I WAS instructed by Someone
of your department to write
this letter to let you know, and
WAS INSTRUCTED TO SEND (\$165.00)
TOGETHER WITH THIS letter and the
statement. thank you

Garfield Richards

HOME (305) 6548376

WORK (954) 9641640.