FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** P95000032652 Corporation Name RIC-DAY, INC Mailing Address Principal Place of Business 3131 N.W. 14 Avenue Miami, Fl. 33125 3a. Date of Last Report 3. Date Incorporated or Qualified 4/26/95 4. FEI Number Applied For 2a. Maiting Address 2. Principal Place of Business 65-0574458 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199,032, Country  $Z_{\rm IP}$ Zip Country Yes No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name • Street Address (P.O. Box Number is Not Acceptable) Daisy Perez 3131 N.W. 14 Street 83 Miami, Fl. 33125 Zip Code 85 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. Hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition DELETE 1. 1 TITLE TITLE P/ S/D 1.2 NAME NAME Daisy Perez 1.3 STREET ADDRESS 3131 N.W. 14 St. STREET ADDRESS 1.4 CITY - ST - ZIP Miami, Fl. 33125 CHTY-ST-ZIP Change Addition DELETE 2 1 TITLE TITLE 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CITY-S1-7IP Change Addition DELETE 3 1 THIE TITLE 3.2 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 3.4 CITY - \$1 - 7IP CITY-S1-ZIP Addition Change [] DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS 500001811015 -05/07/96--01030-025 \*\*\*200.00 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-S1-ZIP ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREFT ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP ☐ Addition Change DELETE 6 1 TITLE TITLE 6.2 NAME NAME 63 STREET ADDRESS

64 CITY - ST - ZIP

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)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental arrural 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 an attachment with an address. 4/23/96

STREET ADDRESS

(305) 634-7420

CR2E034 (12/95)