

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000088723 (8)
 1. Corporation Name

CHEZ RICHIE COMPANY



Principal Place of Business	Mailing Address
163 NURMI DRIVE FT. LAUDERDALE FL 33301	163 NURMI DRIVE FT. LAUDERDALE FL 33301

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		11/16/1995		11/16/1995	
22 Suite, Apt #, etc.		27 Suite, Apt #, etc.		4. FEI Number		<input checked="" type="checkbox"/> Applied For	
23 City & State		28 City & State		65-0681890		<input checked="" type="checkbox"/> Not Applicable	
24 Zip		29 Zip		5. Certificate of Status Desired		5. Certificate of Status Desired	
25 Country		30 Country		<input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution				<input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HOBERMAN, JENNIFER M 3400 N.E. 192ND ST. SUITE 1510 MIAMI FL 33180				81 Name HOBERMAN JENNIFER M 82 Street Address (P.O. Box Number is Not Acceptable) 3536 MYSTIC POINTE DRIVE 83 SUITE 2211 84 City MIAMI FL 85 Zip Code 33180			

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]* DATE: 7/12/96

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
DIRECTOR	IAN R. FINNIGER	13 LAGRANGE MARTIN	ST MARTIN JERSEY C.I. JC3 6JB				
PRESIDENT	GEOFFREY EWENSON	1617 SE 15TH ST, SUITE 301	FT LAUDERDALE FL 33316				

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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *[Signature]* GEOFFREY W. EWENSON 8/2/96 (954) 524 9005

CR2E034 (3/96)