

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

FILED
Sep 05 1997 8:00am
Secretary of State

DOCUMENT # P95000088723 (8)
1. Corporation Name

CHEZ RICHIE COMPANY

Principal Place of Business **Mailing Address**
163 Nurmi Drive **163 Nurmi Drive**
Ft. Lauderdale, FL 33301 **Ft. Lauderdale, FL 33301**

Amended
3. Date incorporated or Qualified **11/16/1995** 3a. Date of Last Report
4. FEI Number **65-0881890** Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

8. Principal Place of Business 2a. Mailing Address
21 Suite, Apt #, etc. 26 Suite, Apt #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

Hoberman, Jennifer Mae
3590 Mystic Pointe Drive
Suite 2211
Miami, FL 33180

10. Name and Address of New Registered Agent

41 Name
42 Street Address (P.O. Box Number is Not Acceptable)
43
44 City FL 45 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 as printed name of registered agent and state of office, or

(PRINT) Name and address of agent responsible to attest what is being filed

(FAX)

12. OFFICERS AND DIRECTORS

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	D Pinniger, Ian R.
13 STREET ADDRESS	3 La Grange Martin
14 CITY, ST, ZIP	St. Martin, Jersey CI
21 TITLE	☐ Change ☐ Addition
22 NAME	D P Hornbacher, Richard
23 STREET ADDRESS	1535 S.E. 17th Street, Suite 201
24 CITY, ST, ZIP	Ft. Lauderdale, FL 33316
31 TITLE	☐ Change ☐ Addition
32 NAME	D Ingram, Sarah Jane
33 STREET ADDRESS	1535 S.E. 17th Street, Suite 201
34 CITY, ST, ZIP	Ft. Lauderdale, FL 33316
41 TITLE	☐ Change ☐ Addition
42 NAME	S T Callejas, Sergio
43 STREET ADDRESS	1535 S.E. 17th Street, Suite 201
44 CITY, ST, ZIP	Ft. Lauderdale, FL 33316
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 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, if 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.

SIGNATURE:

Signature and typed on printed name of signing officer on document

SERGIO CALLEJAS

(954) 524-9005

TOTAL P.09