FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000095240

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 OCT 25 AM 10:48

1. Entity Name: RICH CHARTERS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: LORELEI RESORT MM82
Suite, Apt. #, etc.: MILE MARKER 82
City & State: ISLAMORADA FL
Zip: 33036 Country:

3. Mailing Address: PO BOX 888
Suite, Apt. #, etc.: ISLAMORADA FL
City & State:
Zip: 33036 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0636542 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: Richard Hellmuth
Street Address (P.O. Box Number is Not Acceptable): 211 Mohawk St
Plantation Key FL 33070
City: FL Zip Code:

8. 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: [signature]

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D
NAME	HELLMUTH RICHARD
STREET ADDRESS	211 MOHAWK ST
CITY-ST-ZIP	PLANTATION KEY FL 33070

DO NOT WRITE IN THIS SPACE

500008593765
10/25/02--01062--005 **150.00

CR2E004B (12/01)

12. I 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

I did not receive the annual report since I have been out of the country during the spring + summer.

Please send any late fees

Rick Hellmuth