## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000027432 (9)

RICKY'S DOOR, INC.

## FILED Apr 22 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address									1				
	530 NE 131ST STREET 530 NE 131ST STREET								}				
NO MIAMI FL 33161 NO MIAMI FL 33161										DO NOT WRITE IN THIS SPACE			
İ									· ·	orated or Qualified	1		
		<u></u>		· · · · · · · · · · · · · · · · · · ·					03/22/19			<del></del>	
2. Principal Place of Business				—	2a. Mailing Address				4. FEI Numbe			<del> </del>	pplied For
Suite, Apt W, etc.			Suite, Apt. #, etc.			65-066	6904			lot Applicable			
Suite, Apr. #, etc.			27			5. Certificate	of Status Desired			Additional leguired			
City & State			City & State			6. Election Ca	ampaign Financing	<del></del>		May Be			
23	23			28						Contribution			to Fees
	Zip		Country		Zip	Cour	ntry		8. This corpor	ation owes or has	paid the cu	rrent year Ir	ntangible
24	<u> </u>		25	29		30				roperly Tax due Ju			□ No
9. Name and Address of Current Registered Agent							1		10. Name and	Address of New I	Registered	Agent	
SAAVEDRA, ABRAHAM E							81	Name					
530 NE 131ST STREET								Street Ad	dress (P.O. Box Nur	mber is Not Accept	able)		
ŀ	NO	) MIAMI FL	33161			ŀ	B3						
İ							B3						
						f	84	City				<b>85</b> Zip	Code
-	4 6 -			00 1 00	4500 Ft-34- 64-4	1 - 4				·	FL	<u> </u>	
	IGNATURE		ions of Sections 607.05 gent, or both, in the Stat ith, and accept the obli-						ation's board of dire	ctors. I hereby acc	ept the app	pointment as	s registered
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64 CITY-ST-ZIP

14. 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 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 receivor 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.

6.2 NAME

6 3 STREET ADDRESS

SIGNATURE: Heads Copal

NAME

STREET ADDRESS

4-3-98

5034 (10/97)