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Jan 24 1997 8:00am
Secretary of State

**PROFIT
CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # P96000044845 (1)

1. Corporation Name
RICH ENTERPRISES, INC.



Principal Place of Business
**1500 SAN REMO AVENUE #125
CORAL GABLES FL 33146**

Mailing Address
**1500 SAN REMO AVENUE #125
CORAL GABLES FL 33146-3049**

3. Date Incorporated or Qualified
05/24/1996

3a. Date of Last Report
INITIAL YEAR

2. Principal Place of Business

21 **4450 EAST BAY DRIVE**

Suite, Apt. #, etc.

22 **CLEARWATER, FLORIDA**

23 **34624 USA**

24 **34624**

25 **USA**

2a. Mailing Address

26 **3000 EAGLE BEND ROAD**

Suite, Apt. #, etc.

27 **SPRING HILL FLORIDA**

28 **34606 USA**

29 **34606**

30 **USA**

4. FEI Number

65-0668813

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

9. Name and Address of Current Registered Agent

**RICH, BRUCE L
4450 EAST BAY DR.
CLEARWATER FL 34624**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **RICH, BRUCE L**
STREET ADDRESS **1500 SAN REMO AVENUE #125**
CITY - ST - ZIP **CORAL GABLES FL 33146**

TITLE **VSTD** ☐ DELETE
NAME **RICH, MARK D**
STREET ADDRESS **1500 SAN REMO AVENUE #125**
CITY - ST - ZIP **CORAL GABLES FL 33146**

TITLE **D** ☐ DELETE
NAME **RICH, MICHAEL B JR**
STREET ADDRESS **1500 SAN REMO AVENUE #125**
CITY - ST - ZIP **CORAL GABLES FL 33146**

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

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **3000 EAGLE BEND ROAD**
1.4 CITY - ST - ZIP **SPRING HILL, FLORIDA 34606**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **3000 EAGLE BEND ROAD**
2.4 CITY - ST - ZIP **SPRING HILL, FLORIDA 34606**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS **3000 EAGLE BEND ROAD**
3.4 CITY - ST - ZIP **SPRING HILL FLORIDA 34606**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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; 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.

SIGNATURE:

MARK D. RICH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/97
Date

305-577-7058
Daytime Phone

CR2E034 (9/96)