

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 08:00 A
Secretary of State

DOCUMENT # P96000101664 1. Entity Name RICHMOND HEIGHTS PROMENADE CORPORATION					
Principal Place of Business 14440 LINCOLN BLVD MIAMI, FL 33176		Mailing Address 14440 LINCOLN BLVD MIAMI, FL 33176			
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0771573	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MERIT, PATRICK A 14440 LINCOLN BLVD. MIAMI, FL 33176				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE VP <input type="checkbox"/> Delete	NAME COLLIER, LAURA		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 14035 JEFFERSON ST	CITY-ST-ZIP MIAMI, FL 33176		NAME COLLIER, LAURA		
TITLE <input type="checkbox"/> Delete	NAME ST FRIERSON, WALTER		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 11500 SW 139 TERRACE	CITY-ST-ZIP MIAMI, FL 33176		NAME FRIERSON, WALTER		
TITLE <input type="checkbox"/> Delete	NAME P MERIT, PATRICK A		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 11401 SW 147 ST	CITY-ST-ZIP MIAMI, FL 33176		NAME MERIT, PATRICK A		
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STREET ADDRESS 11401 SW 147 ST	CITY-ST-ZIP MIAMI, FL 33176		NAME MERIT, PATRICK A		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Patrick A Merit</i>			Date: 4-13-07		Daytime Phone #: 305-232-6611
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>



03022007 Chg-P CR2E034 (12/06)

4. FEI Number **65-0771573** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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SIGNATURE: *Patrick A Merit* Date: **4-13-07** Daytime Phone #: **305-232-6611**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #