

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04-28-2003 91365 046 ***158.75

03 DEC 17 AM 8:30

DOCUMENT # P97000012515

1. Entity Name
R. I. C., INC. ✓

Principal Place of Business: 16795 NW 86TH CT. MIAMI, FL 33016 US
Mailing Address: 16795 NW 86TH CT. MIAMI, FL 33016 US

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.

City & State: City & State

4. FEI Number: 65-0730689 Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent: HERNANDEZ, ROLANDO 16795 NW 86TH CT. MIAMI, FL 33016

7. Name and Address of New Registered Agent: Name: Street Address (P.O. Box Number is Not Acceptable): City: State: 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: _____ DATE: _____

9. Election Campaign Financing Trust Fund Contribution: \$5.00 May 30 Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete HERNANDEZ, ROLANDO 16795 NW 86TH CT. MIAMI, FL 33016	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 thereto in address, with all other like empowers.

SIGNATURE: *Orlando Hernandez* President 04-25-03
DATE: _____

REINSTATEMENT 03



CHECK HERE IF MAKING CHANGES

CRP/USA (11/02)

Andy:

May 26, 2003

DIVISION OF CORPORATIONS
P.O. BOX 1500
Tallahassee, FL 32302-1500

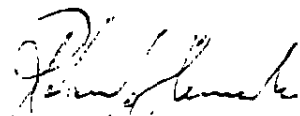
SUBJECT: R.I.C., INC
REF NUMBER: P97000012515

To Whom It May Concern:

Along with this letter, I'm enclosing the corrected Annual Uniform Business Report for R.I.C., Inc, as requested, a copy of the check for the amount of \$158.75, wish you have already received, and a copy of the letter that was sent to us.

Please make the necessary changes, to reinstate R.I.C., Inc.
Thank you for your time.

Sincerely,



Rolando Hernandez
President

ORLANDO DE ARMAS, C.P.A., P.A.

10300 SUNSET DRIVE
SUITE 270
MIAMI, FL 33173

PHONE: (305) 273-6137
FAX: (305) 273-9137
E-mail: armascpa@bellsouth.net

FAX*FAX*FAX*FAX*FAX*FAX*FAX*FAX*FAX*FAX*FAX*FAX*FAX*

TO: Andy FROM: Jessica/Vanessa
FAX: 305-273-6137 DATE: 12/17/09
PAGES: 4 (Including cover)
RE: _____

URGENT FOR REVIEW PLEASE COMMENT PLEASE REPLY

COMMENTS:
Good afternoon
my lawyer all the documents I sent to the
law of state have been a week or so
away from us our police number is
(305) 273-6137.
Thank you for your time.
Vanessa / 305 273 6137