

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 19, 2004 08:00 AM
Secretary of State**

DOCUMENT # P97000017617

**1. Entity Name
RICH-MART, INC.**



**Principal Place of Business
15876 N.W. 10TH STREET
PEMBROKE PINES, FL 33028**

**Mailing Address
15876 N.W. 10TH STREET
PEMBROKE PINES, FL 33028**



04152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

**4. FEI Number
65-0907854**

**Applied For
Not Applicable**

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

6. Name and Address of Current Registered Agent

**KRAUT, MINDY R ESQ.
8360 WEST OAKLAND PARK BLVD., SUITE 317
SUNRISE, FL 33351**

**DO NOT WRITE
IN THIS SPACE**

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

Signature typed or printed name of registered agent and if applicable.

(NOTE: Registered Agent signature required when re-issuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution. ☐**

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MARTIN, RENE
STREET ADDRESS	15876 N.W. 10TH STREET
CITY-ST-ZIP	PEMBROKE PINES, FL 33028
TITLE	VP
NAME	MARTIN, FARIDI
STREET ADDRESS	15876 NW 10 STREET
CITY-ST-ZIP	PEMBROOKE PINES, FL 33028
TITLE	S
NAME	RENEWADI, MARTIN
STREET ADDRESS	15876 NW 10TH ST
CITY-ST-ZIP	PEMBROKE PINES, FL 33028
TITLE	C
NAME	MARTIN, CHRISTOPHER K
STREET ADDRESS	15876 NW 105TH ST
CITY-ST-ZIP	PEMBROKE PINES, FL 33028
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**000000118963
04/19/04-80081-011 150.00**

**DO NOT WRITE
IN THIS SPACE**

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *René Martin* RENE MARTIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04 9547048810

Date

Daytime Phone #