Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90033 042 ***150.00



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000018691

RICHARD & RICHARD, ATTORNEYS AT LAW, P.A.

Principal Place of Business Mailing Address					1.3		
		725 COLORADO AVE					
STUART FL 34994 STUART US US		STUART FL 34994 US	IANI FL 34994		DO NOT WRITE IN THIS SPACE		
03		•			3. Date Incorporated or Qualifed		
					02/24/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
21 26				65-0734002	No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	–		5. Certifcate of Status Desired	\$8.75 A	
22		27					<u> </u>
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 Added t	
23		28	Countr		Trust Fund Contribution		0 F005
Zip 24	Country [25]	Zip 30	- ·	y	 This corporation owes the current year Personal Property Tax. 	ar intangible □Yes	™No
	9. Name and Address of Current		1		10. Name and Address of New Registe	red Agent	
_			81	Name			
RICHARD, LANCE P ESQ.			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
725 COLORADO AVENUE			02	Sileet Addi	is a second of the second of t		
STUART FL 34994			83				
			84	City		FL 85 Zip (Code
agent. I a SIGNATURE	im familiar with, and accept the obligat	ons of, Section 607.0505, Fighter	Statutes	5 .	poration submits this statement for the purposon's board of directors. I hereby accept the a		
			gistered Age	int signature require	ADDITIONS/CHANGES TO OFFICER		RS IN 12
12.	D OFFICERS ANI	DELETE	1.1 TITLE		ABBITIONO/OFFICE TO GET	☐ Change	Addition
NAME	RICHARD, LANCE P ESQ.		1.2 NAME				
STREET ADDRESS	725 COLORADO AVENUE			T ADDRESS			
	STUART FL 34994			ST-ZIP			
CITY-ST-ZIP	D			31-2Jr		☐ Change	Addition
NAME	RICHARD, ROSEMARIE ESQ.		2.2 NAME				
STREET ADDRESS	725 COLORADO AVENUE		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	STUART FL 34994		2. 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME	1		3.2 NAME				
STREET ADDRESS			3.3 STREE	ET ADORESS			
CITY-ST-ZIP			3.4 CITY-	ST-ZIP	• •	·	<u> </u>
TITLE		☐ DEFELE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADORESS			
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		•	☐ Change	☐ Addition
ı	1		52 NAME	1			

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 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, with all other like ampowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

DELETE

☐ Change

(Addition