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May 13, 1999 8:00 am
Secretary of State
05-13-1999 90034 012 ***158.75

PROFIT CORPORATION ANNUAL REPORT
1998 9

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

DOCUMENT # **P97000046152 (9)**

1. Corporation Name
RICHLAND INTERNATIONAL CO.

Principal Place of Business
501 BRICKELL KEY DRIVE
SUITE 400
MIAMI FL 33131

Mailing Address
501 BRICKELL KEY DRIVE
SUITE 400
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 654 S. MILITARY TRAIL
Suite, Apt. #, etc.
22
City & State
23 DEERFIELD BEACH FL
Zip 24 33442 Country 25 USA

2a. Mailing Address
26 654 S. MILITARY TRAIL
Suite, Apt. #, etc.
27
City & State
28 DEERFILED BEACH FL
Zip 29 33442 Country 30 USA

3. Date Incorporated or Qualified
05/23/1997

4. FEI Number
65 0802151
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$9.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
SLOSBERGAS, NELSON
501 BRICKELL KEY DRIVE
SUITE 400
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name: JAMIL F. SILVA
82 Street Address (P.O. Box Number is Not Acceptable): 750 SW 92 PASSAGE
83
84 City: MIAMI **FL** 85 Zip Code: 33174

11. *Pursuant to the provisions of Sections 607.0502 and 607.1509, 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 JAMIL F. SILVA PRESIDENT 04/29/99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D P DA SILVA, JAMIL F 7925 NW 12TH STREET STE NR-112 MIAMI FL 33126	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition 654 S. MILITARY TRAIL DEERFILED BEACH , FL 33442	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition	

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.

SIGNATURE: JAMIL F. SILVA PRESIDENT 04/29/99 305 477 9133

CR2E034 (10/97)