FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000065531 (0)

RICHINI INTERNATIONAL, INC.

FILED May 04 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address			{ I LACONARDA INO ERISTI CARAL MUNIT ROLLI CONTR DOSI	IN MILET BRIDT BRIND DIEDE ELDE INDE	
C/O MICHAEL FELDENKRAIS. P.A. C/O MICHAEL FELDENKRAIS. I				1		
12000 BISCAYNE BOULEVARD #220	000 BISCAYNE BOULEVARD #220 12000 BISCAYNE BOULEVARD #220					
NORTH MIAMI FL 33181				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified		
2. Principal Place of Business	2a. Majling Addre			07/28/1997 4. FEI Number	Applied For	
21 2108 N.W. 22	2 (1 - 26) (2 (1) (2)	3iscoure	Palvo	65-07842010	Applied For Not Applicable	
Suite, Apt. #, etc.	Suite Apt #,		<u> </u>		CO 7E	
22	27 \$1 221)		6. Certificate of Status Desired	Fee Required	
23 MIOMI, FI	City & State	Mami,	D	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 221H7	$\therefore a \land \vdash \forall 2 \land \forall 1$	Countr	$\overline{S}A$.	8. This corporation owes or has paid the		
24 27 17 6 25	ress of Current Registered Agent	30 U		Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No	
		81	Name	10. Hattle blid Addiess of Hem Hegiste	Her Wall	
TELUCIARAIS, MICHAEL				·		
12000 BISCAYNE BOULEVARD SUITE 220 82 Stree				dress (P.O. Box Number is Not Acceptable)		
						
MONTH MIXMITE 031	0 1					
		64	City	•	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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		more o				
12.	ane of registered agent and title if applicable OFFICERS AND DIRECTORS	(NOTE Registered As	ent signature require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE PROSERVA	d a ct			ADDITIONS/CHANGES TO OFFICERS	Change Addition	
NAME FIRST MU	QFHCK - = = =	1.2 NAME	i		,	
STREET ADDRESS 21067 N.W.	22 Ct		T ADDRESS			
CITY-ST-ZIP MICHON FI	33)42	1.4 CITY-				
TITLE	☐ DEL				Change Addition	
NAME		22 NAME				
STREET ADDRESS		2.3 STREE	T ADDRESS			
CITY-ST-ZIP		2. 4 CITY	ST-ZIP			
TITLE	☐ DEL				Change Addition	
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREE	T ADDRESS			
CITY-SI-ZIP		3.4. CiTY-	ST-ZIP			
TITLE	☐ DEL	ETE 4.1 TITLE			Change Addition	
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREE	T ADDRESS			
CITY-ST-ZIP		4.4 CITY-	ST-ZIP			
TITLE	DEL DEL	ETE 5.1 TITLE	1		☐ Change ☐ Addition	
NAME		52 NAME				
STREET ADDRESS		5.3 STREE	T ADDRESS			
CITY-ST-ZIP		5.4 CITY-	ST-ZIP			
TITLE	☐ DELI	II -			Change Addition	
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREE	T ADORESS			
CITY-ST-ZIP		6.4 CITY-		6	Alf Al-Lab	
14. I nereby certify that the informal indicated on this annual report officer or director of the corner.	tion supplied with this filing does not q or supplemental annual report is true a ation or the receiver or true to a server	uality for the exemp and accurate and the ared to execute this	AION Stated in I	Section 119.07(3)(i), Florida Statutes. I furth re shall have the same legal effect as if mad gired by Chapter 607. Florida Statutes: and it	er certify that the information less under eath; that I am an lithet my name access in	

an attachment with an address.

411 198