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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 08 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000097485 (1)

R.I.C.H. INTERNATIONAL FINANCE CORPORATION

Principal Place of Business Mailing Address				Ent 43114 1841 1881 1811 1919 1919 1911	
610 SAN JUAN DRIVE CORAL GABLES FL 33143		610 SAN JUAN DRIVE CORAL GABLES FL 33143			
SOUTH CADELO TE COTTO		COUNT ONDERS TO SUITE		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		11/17/1997 4. FE_Number	I Applied For
21	idos or Esserios	26		65-079454	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	t 0	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	7 _(p)	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation owes or has pa Personal Property Tax due June	
	9. Name and Address of Curre			10. Name and Address of New Re	
	INOS A, RICHARD P		81 Name		
	O SAN JUAN DRIVE		82 Street Ad	ddress (P.O. Box Number is Not Acceptal	ble)
"	DRAL GABLES FL 33143		63		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Statu	les, the above-named c	orporation submits this statement for the p	purpose of changing its registered
agent. La	m familiar with, and accept the oblig	gations of, Section 607.0505 E	lerida Statules	ration's board of directors. I hereby acce	pt the appointment as registered
•					
SIGNATURE	CANOSA, RICHARD 1).			04/30 / NAMP
	Signature, typed or profes name of registered as		L. negistered Agent e-gnature re		OY/39 / NU/7 DATE CERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, typed or profes name of registered as	NO DIRECTORS DELETE	13.	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	OY/39 / N/47 DATE CERS AND DIRECTORS IN 12 Change Addition
12.	Signature typind orderfloor name of registered as OFFICE RS AN P CANOSA, RICHARD P	ND DIRECTORS	13.		
12. TITLE	Signature typind oid enfect name of registered as OFFICE RS AN P CANOSA, RICHARD P 610 SAN JUAN DRIVE	ND DIRECTORS	13. 1.1 TITLE		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature typind orderfloor name of registered as OFFICE RS AN P CANOSA, RICHARD P	ND DIRECTORS DELETE	13. 1.1 TITE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		☐ Change ☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature typind of enfect name of registered at OFFICE RS AN P CANOSA, RICHARD P 610 SAN JUAN DRIVE CORAL GABLES FL 33143	ND DIRECTORS	13. 11 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature typind of enfect name of registered at OFFICE RS AN P CANOSA, RICHARD P 610 SAN JUAN DRIVE CORAL GABLES FL 33143 V REGLEY, BEATRICE M	ND DIRECTORS DELETE	13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME		☐ Change ☐ Addition
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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 suppliemental 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 empewared 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