PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9800000952

1. Corporation Name

RICHLACE, INC.

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90057 035 ***150.00



Principal Place of Business Mailing Address					. I ### (10 ibin) jurit meilt matti matti matti matti matti matti inti inni.
C/O RICHLAND MILLS, INC. C/O RICHLAND MILLS, INC.					
3965 EAST 10TH		3965 EAST 10TH COURT			
HIALEAH FL 3301	13	HIALEAH FL 33013			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 01/01/1998
2. Principal Pla	ce of Rusiness	2a. Mailing Address			4. FEI Number Applied For
	<u> </u>	•		65-0871531 Not Applicable	
21 7455 1 Suite, Apt. #	WEST 2ND COURT	28 7455 WEST 2ND COURT Suite Apt. # etc.		COURT	\$8.75 Additional
22 NONE	·	27	_		5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23 HIALE	AH. FLORIDA	28 HIALEAH, F	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution Added to Fees
Zip	Country	Zip Country		У	8. This corporation owes the current year Intangible
24 33014		29 33014 30	<u> </u>		Personal Property Tax.
	9. Name and Address of Current	Registered Agent	8	<u> </u>	10. Name and Address of New Registered Agent
MADY JAMES ESO				1 Name	i
MARX, JAMES ESQ SUITE 1870 - FIRST UNION FINANCIAL CENTER			8	2 Street Addr	ress (P.O. Box Number is Not Acceptable)
	OUTH BISCAYNE BOULEVARD	COLIVIEN			
	FL 33131	83		3	
IVIE	1 2 30 10 1		8	4 City	85 Zip Code
				<u>r </u>	FL S Z C C C C C C C C C
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 period directors. I hereby accept the appointment as registered					
agent. I am	familiar with, and accept the obligation	ns of, Section 607.0505, Florida	a Statut a	s 117	
SIGNATURE _	SCOTT D. BASHAW-	PRESIDENT /	\searrow	00/	nd white reinstating) DATE
12.	Ignature, typed or printed name of registered agent a OFFICERS AND		13.	ent signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
т		☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
1 -	PRESIDENT	_	1.2 NAME	:	
· · · · · · · · · · · · · · · · · · ·	SCOTT D. BASHAW	717	1.3 STRE	ET ADDRESS	
	2118 MADEIRA DRIV		1.4 CITY-	ST-ZIP	
TITLE	WESTON, FL 3332/		2.1 TITLE		☐ Change ☐ Addition
NAME	CHAIRMAN OF THE BOARD		2.2 NAME	: }	
STREET ADDRESS	RICHARD B. WOLF 625 BILTMORE WAY	#001	2.3 STRE	ET ADDRESS	
CITY-ST-ZIP	CORAL GABLES, FI		2. 4 CITY	-ST-ZIP	
TITLE	CURAL GADLES, PI	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STRE	ET ADDRESS	
CITY-ST-ZIP			3.4. CITY	·ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	· \	☐ Change ☐ Addition
NAME			4. 2 NAM	E	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	
TITLE	-	☐ DELETE	5.1 TITLE	1	☐ Change ☐ Addition
NAME			5.2 NAME	i	
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			54 CITY-		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			ı	ET ADDRESS	
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	<u> </u>

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 empowered.

SIGNATURE: