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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000042216**1. Corporation Name

RICHBROS.COM, INC.

Principal Place of Business

Mailing Address

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90227 022 ***150.00



SUITE 230	2 SOUTH U.S. HIGHWAY 1 9122 SOUTH U.S. HIGHWAY 1 TE 230 SUITE 230 LUCIE FL 34952 ST LUCIE FL 34952				DO NOT WRF 3. Date Incorporated or Qualifed 05/11/1998	ITE IN THIS SPACE			
Principal Place of Business 2a. Mailing Address					4. FEI Number		/	Applied For]
21 279 SW HOMELAND RD 26 245 SW PORTST				LCIG B	CVA 65-0844228		1	Not Applicable]
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired			Additional	
27 Suire 212					5. Centicate of Status Desired	ليا	Fee F	Required	
City & State Zip Country Zip				6. Election Campaign Financing Trust Fund Contribution 5.00 Added to			May Be d to Fees		
Zip Country Zip Country 2 1 3 4 9 84 3 5 2 5 2 5 2 5 2 5 2 7 3 0 3 0 3 0 3 0 3 0 3 0 3 0 3 0					8. This corporation owes the curre			X No	
,	9. Name and Address of Current		1		10. Name and Address of New F]
			81	Name					
AMERILAWYER 343 ALMERIA AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)					
CORAL GABLES FL 33134									1
0011			83						1
			84	City		FI	85 Zip	p Code	
office or n	to the provisions of Sections of J. 3002 egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of management of the state of sections of the state of the st	Florida. Such change was autons of, Section 607.0505, Florid	nonzed by la Statutes	tne corpor	orporation submits this statement for the ation's board of directors. I hereby acception acception of the statement of the st	t the appoin	tment as	registered	
12.	OFFICERS AND		13.	ıt şığınatdı e rei	ADDITIONS/CHANGES TO OF		D DIRECT	TORS IN 12	1 8
		□ DELETE	1,1 TITLE		ADDITIONAL UTALLA TO THE		Change Ch		1
TITLE	PSTD		1.2 NAME				_ `	_	;
NAME	RICHARDSON, PAUL A		1.3 STREET	***************************************	279 SW HOMELAND	as,	•	_	8
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			64 CITY-S	T 710					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 reserver 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 attemption with agraddress, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

. KICHARDSON

4/20/99 SL

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