

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2002 8:00 am
Secretary of State

0608910
 AV

DOCUMENT # **P99000100328**

1. Entity Name
GEORGE RICHARDS & ASSOCIATES, INC.

01-14-2002 90018 006 ***150.00

Principal Place of Business 2111 NW 139TH STREET OPA LOCKA FL 33054	Mailing Address 2111 NW 139TH STREET BAY #4 OPA LOCKA FL 33054
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2. Principal Place of Business 2111 NW 139th Street Suite, Apt. #, etc. Bay #4	3. Mailing Address 2134 NW 43 Street Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Opalochka FL	City & State Miami FL	4. FEI Number 65-0961823	Applied For <input type="checkbox"/> Not Applicable
Zip 33054	Country U.S.A.	Zip 33142	Country U.S.A.

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
RICHARDS, RALSTON G
2111 NW 139TH STREET
OPA LOCKA FL 33054

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
(Type or typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD RICHARDS, RALSTON G 2134 NW 43RD STREET MIAMI F; 33142 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Ralston G. Richards - President 01-07-02 305-908-9532**

CR2E034 (9/01)