

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V37373

(0)

1. Corporation Name  
RICHMOND REPORTING, INC.

Principal Place of Business

5200 NE 14TH WAY  
STE. 306  
FT. LAUDERDALE FL 33334  
US

Mailing Address

5200 NE 14TH WAY  
STE. 306  
FT. LAUDERDALE FL 33334-4964  
US

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

RICHMOND, NANCY  
5200 NE 14TH WAY  
STE. 306  
FT. LAUDERDALE FL 33334

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.07(2) and 607.15(8), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both, as the State of Florida has 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 607.09(6), Florida Statutes.

SIGNATURE

Signature of person filing this report (with company)

(If not applicable, provide name of registered agent)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

2. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

3. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

4. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

6. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

7. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

8. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exception stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report is complete and 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 its agent or its duly empowered officer, the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attached form with an address.

SIGNATURE

*[Signature]*

*[Signature]* 10/2/97 354 443-4606

FILED  
Apr 29 1997 8:00am  
Secretary of State



3. Date Incorporated or Qualified 05/19/1992  
3a. Date of Last Report 05/01/1996  
4. FEI Number 65-0333888  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes: ☐ Yes ☐ No  
10. Name and Address of New Registered Agent

CR2E034 (9/96)