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

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

04-22-1999 90150 026 ***150.00

DOCU!	MENT # V42352						
•	RICA, INC.				* * * * * * * * * * * * * * * * * * *		
• • • • • • • • • • • • • • • • • • • •	1.**						
Principal Place	of Business	Mailing Address				IDIN BUDAR BADAR DI	9)† 8(8)į 1 30)
•	AYSHORE DRIVE	C/O E. MASFORROLL. CPA					
#2041		11180 WEST FLAGLER #11			DO NOT WRITE IN THIS	SPACE	
MIAMI FL 33132	!	MIAMI FL 33174			3. Date Incorporated or Qualifed	OFFICE	
					06/09/1992		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Apr	lied For
21		26			65-0337937		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5, Certificate of Status Desired	\$8.75 A	
22		27	-			Fee Re	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 \ Added to	
Zip Country		28	Country	<u> </u>	8. This corporation owes the current year Int		
24	25		30		Personal Property Tax.		∑ No
24	9 Name and Address of Current	1=-			10. Name and Address of New Registered	Agent	
			81	Name			:
	ANTARA, CAIO A		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
1717 NORTH BAYSHORE DRIVE							
#2041			83				
MIAN	11 FL 33132		84	City	r:	85 Zip C	ode
				<u></u>	FL	changing its	rogistored
11, Pursuant office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes Florida. Such change was aut	s, the abov thorized by	the corporation	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoi	ntment as reg	istered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	da Statutes	3.			
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: F	Registered Age	nt signature require	od when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12
IIILE '	PD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition [
NAME	ALCANTARA, CAIO A		1.2 NAME				
STREET ADDRESS	1717 NORTH BAYSHORE DRIVE #2041		1.3 STREE	TADORESS			}
CITY-ST-ZIP	MIAMI FL 33132		1.4 CITY-ST-ZIP			Change	Addition
TITLE	VDP	VDP □ DELETE 2.11				☐ Change	☐ Addition
NAME	LACENDA, I ENVANDO		2.2 NAME	1		•	Ì
STREET ADDRESS	****			TADORESS		_	}
CITY-ST-ZIP			3.1 TITLE	ST-ZIP		Change	Addition
TITLE			3.1 III.E 3.2 NAME			_ •	-
NAME				T ADDRESS			ĺ
CITY-ST-ZIP	MIAMI FL 33132	#2041	3.4. CITY-	l			
TITLE	WIPAWI TE GOTOE	. DELETE	4.1 TITLE			☐ Change	Addition
NAME	•		4. 2 NAME	:			
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-1	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP		☐ DELETE	5.4 CITY-1	si-ZIP		Change	[] Addition
NAME :			6.2 NAME			_ change	
			1	T ADDRESS	en.		
STREET ADDRESS			SA CITY	172E S	10.11		

14. I hereby certify that the information supplied with this filing does not qualify for the country that the information indicated on this annual report or supplemental annual report is true and accurate. The country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute this country that I am an officer or director of the corporation or the recover or trustee empowered to execute the country that I am an officer or director of the corporation or the recover or trustee empowered to execute the country that I am an officer or director of the corporation or the recover of the corporation or the recover or trustee empowered to execute the corporation or the recover of the corporati

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AP-20-1999

305-5391263

Daytime Phone i