


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # 250271**  
 1. Entity Name  
**RIVERSIDE EQUIPMENT CORPORATION**



Principal Place of Business      Mailing Address  
**2901 N.W. NORTH RIVER DRIVE**      **2945 NW 21ST TERRACE**  
**MIAMI FLA, 33142-7027 US**      **MIAMI, FL 33142-7027 US**

**DO NOT WRITE IN THIS SPACE**



01032008    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
**59-0948890**      Not Applicable

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

6. Name and Address of Current Registered Agent  
**BABUN, JOSE JESUS**  
**2945 NW TERRACE**  
**MIAMI, FL 33142**

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

00000882309  
 04/16/08-80035-020 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BABUN, JOSE 3160 NW 14 ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BABUN, JOSE JESUS 12711 NW 6 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD BABUN, SARA CRISTINA 9250 SW 69 ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jose J. Babun      JOSE J. BABUN      4-3-08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #