

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**FILED**

95 JUL 11 AM 11:43  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

800001536318  
 -07/12/95--01090--004  
 \*\*\*\*\*61.25 \*\*\*\*\*61.25  
 DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995  
 FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 714481 (9)  
 1. Corporation Name  
 RIO NUEVO DOCKS, INC.

Principal Place of Business Mailing Address  
 310 SE 15TH AVE. 310 SE 15TH AVE.  
 POMPANO BEACH FL 33060 POMPANO BEACH FL 33060  
 US 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 24 Country 25 29 Zip 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report  
 04/22/1968 07/11/1994  
 4. FEI Number Applied For  
 NOT APPLICABLE Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required  
 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
 PELTON, ARTHUR  
 310 SE 15TH AVE  
 POMPANO BEACH FL 33060  
 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 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent, or both, in the State of Florida. Such change was 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 607.0505, Florida Statutes.

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

| 12. OFFICERS AND DIRECTORS |                         | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|-------------------------|---|---|
| TITLE                      | D                       | 1.1 TITLE   | <del>XXXXXXXXXX</del> P <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                       | STRAHER, BILL           | 1.2 NAME  | <del>XXXXXXXXXX</del> BROWNING, LAWRENCE  |
| STREET ADDRESS             | 136 FAIRWICH ST         | 1.3 STREET ADDRESS                                    | 4050 SW 1ST STREET  |
| CITY-ST-ZIP                | TAVERNIER FL            | 1.4 CITY-ST-ZIP                                       | PLANTATION, FL 33317  |
| TITLE                      | TS                      | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| NAME                       | PELTON, ARTHUR          | 2.2 NAME  |   |
| STREET ADDRESS             | 310 SE 15TH AVE         | 2.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | POMPANO BEACH FL        | 2.4 CITY-ST-ZIP                                       |   |
| TITLE                      | PD                      | 3.1 TITLE   | D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                  |
| NAME                       | DUFOUR, GARY            | 3.2 NAME  |   |
| STREET ADDRESS             | 3100 NE 28 AVE          | 3.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | LIGHTHOUSE POINT FL     | 3.4 CITY-ST-ZIP                                       |   |
| TITLE                      | D                       | 4.1 TITLE   | V <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                       |
| NAME                       | BROWNING, LAWRENCE      | 4.2 NAME  | <del>XXXXXXXXXX</del> SURGE, ALEX   |
| STREET ADDRESS             | 822 S E 9TH ST          | 4.3 STREET ADDRESS                                    | 809 SW 9 TERRACE  |
| CITY-ST-ZIP                | DEERFIELD BCH, FL 00000 | 4.4 CITY-ST-ZIP                                       | FORT LAUDERDALE FL 33305  |
| TITLE                      | D                       | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| NAME                       | DANKO, FRANK            | 5.2 NAME  |   |
| STREET ADDRESS             | 1821 ADAMS ST.          | 5.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | HOLLYWOOD FL 33020      | 5.4 CITY-ST-ZIP                                       |   |
| TITLE                      |                         | 6.1 TITLE   | D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                                  |
| NAME                       |                         | 6.2 NAME  | TAYLOR, CLIVE   |
| STREET ADDRESS             |                         | 6.3 STREET ADDRESS                                    | 624 N.E. 3 STREET   |
| CITY-ST-ZIP                |                         | 6.4 CITY-ST-ZIP                                       | DANIA, FL 33004   |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Arthur Pelton ARTHUR J. PELTON 6/29/95 407-274-0200  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #