

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90005 034 ***158.75

DOCUMENT # L51468

1. Entity Name

RIVEREX CORPORATION

Principal Place of Business

% IBC FIDUCIARY INC
444 BRICKELL AVE #51-246
MIAMI FL 33131

Mailing Address

% IBC FIDUCIARY INC
444 BRICKELL AVE #51-246
MIAMI FL 33131

2. Principal Place of Business

444 BRICKELL AVENUE

3. Mailing Address

444 BRICKELL AVENUE

Suite, Apt. #, etc.

#51-246

Suite, Apt. #, etc.

#51-246

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33131

Country

US

Zip

33131

Country

US

4. FEI Number

65-0191093

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

IBC FIDUCIARY INC
100 S E SECOND STREET
SUITE 2315-A
MIAMI FL 33131

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	PD			
	HENLEY, J.	444 BRICKELL AVE #51-246	MIAMI FL	
	S			<input type="checkbox"/> Delete
	HENNING, U.	444 BRICKELL AVE #51-246	MIAMI FL	
	AS			<input type="checkbox"/> Delete
	DELLAVEDOVA, A.	444 BRICKELL AVE., #51-246	MIAMI FL	
	AS			<input checked="" type="checkbox"/> Delete
	BALDOMERO, M.	444 BRICKELL AVE., #51-246	MIAMI FL	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	D			
	HENLEY, J.	444 BRICKELL AVENUE, #51-246	MIAMI, FL 33131	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	P-D			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	DELOROZOY, R.	444 BRICKELL AVENUE, #51-246	MIAMI, FL 33131	
	VP			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	DELOROZOY, A.	444 BRICKELL AVENUE, #51-246	MIAMI, FL 33131	

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:

J. HENLEY
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/02

(305) 358-4441

Date

Daytime Phone #

CR2E034 (9/01)