


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000038235
 1. Entity Name
 RIVERSIDE MARINE, INC.



Principal Place of Business
 8100 N FLA AVE
 TAMPA, FL 33604

Mailing Address
 8100 N FLA AVE
 TAMPA, FL 33604



02142006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 59-3641501

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LAHUSKY, CHRISTOPHER
 8100 N FLA AVE
 TAMPA, FL 33604

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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, 2006 Fee will be \$550.00

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

U00000475043
 04/04/06-80048-011 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LAHUSKY, CHRISTOPHER
STREET ADDRESS	8100 N FLA AVE
CITY-ST-ZIP	TAMPA, FL 33604
TITLE	ST
NAME	MATHERS, ANDREW
STREET ADDRESS	906 E. DIANA STREET
CITY-ST-ZIP	TAMPA, FL 33604
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:  **CHRIS LAHUSKY** 2/14/06 813 2547
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #