

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000114009

Entity Name: RIING, CORP.

FILED  
Jun 17, 2004  
Secretary of State

**Current Principal Place of Business:**

210 SW 15TH RD  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

210 SW 15TH RD  
MIAMI, FL 33129

**New Mailing Address:**

FEI Number: 03-0386142

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORDERO, J. JUDAS ESQ  
722 HIALEAH DR  
HIALEAH, FL 33010

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: LOPEZ, VALENTINA  
Address: 4040 NE 2ND AVE. STE. 305  
City-St-Zip: MIAMI, FL 33137

Title: PD ( ) Delete  
Name: GALDO, ADRAN  
Address: 210 SW 15TH RD  
City-St-Zip: MIAMI, FL 33129

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: T (X) Change ( ) Addition  
Name: LOPEZ, VALENTINA  
Address: 210 SW 15TH ROAD  
City-St-Zip: MIAMI, FL 33129

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADRIAN GALDO

P/D

06/17/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date