


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 03, 2005 8:00 am**  
**Secretary of State**

03-03-2005 90176 033 \*\*\*150.00

<b>DOCUMENT # P03000087260</b> 1. Entity Name <b>DANIEL RIVEIRO, JR., P.A.</b>					
Principal Place of Business <b>3105 W AZAELA ST TAMPA, FL 33609</b>			Mailing Address <b>301 W PLATT ST # 400 TAMPA, FL 33606</b>		
2. Principal Place of Business <b>3105 W AZEELE ST</b>			3. Mailing Address Suite, Apt. #, etc. <b>TAMPA, FL</b>		
City & State <b>TAMPA, FL</b>			City & State <b>TAMPA, FL</b>		
Zip <b>33609</b>		Country <b>USA</b>		4. FEI Number <b>59-3648481</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>RIVEIRO, DANIEL JR. 2413 BAYSHORE BLVD., STE. 403 TAMPA, FL 33629</b>			7. Name and Address of New Registered Agent Name <b>RIVEIRO, DANIEL JR</b> Street Address (P.O. Box Number is Not Acceptable) <b>3932 EDEN ROC CIR WEST</b> City <b>TAMPA</b> FL <b>33634</b>		
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 <u><i>Daniel Riveiro</i></u> DATE <u>2/28/05</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIVEIRO, DANIEL JR. 2413 BAYSHORE BLVD., STE. 403 TAMPA, FL 33629	<input type="checkbox"/> Delete			
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12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <u><i>Daniel Riveiro</i></u>			Date <u>2/28/05</u> (813) 258-8881		