2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015968

Entity Name: SOUTH SHORE RIVER CORP.

FILED Jun 04, 2006 Secretary of State

Certificate of Status Desired ()

Durrent Principal Place of Business: New Principal Place of Busines	t Principal Place of Business:	New Principal Place of Busines
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15067 SW 103 TERRACE **UNIT 14107**

MIAMI, FL 331963757 US

New Mailing Address:

FEI Number Not Applicable (X)

12876 SW 133 TERRACE MIAMI, FL 331863757 US

MIAMI, FL 331863757 US

12876 SW 133 TERRACE

MIAMI, FL 331863757 US

Current Mailing Address:

15067 SW 103 TERRACE **UNIT 14107**

MIAMI, FL 331963757 US

FEI Number:

Name and Address of New Registered Agent:

Name and Address of Current Registered Agent:

FONT, ELEONORA 12876 SW 133 TERRACE

15067 SW 103 TERRACE **UNIT 14107**

FONT, ELEONORA

MIAMI, FL 331963757 US

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: 06/04/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

FEI Number Applied For ()

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete

FONT, ELEONORA Name:

15067 SW 103 TERRACE, UNIT 14107 Address:

City-St-Zip: MIAMI, FL 331963757 US

Title: () Delete Name: ZUCCARO, ALEJANDRO

15067 SW 103 TERRACE, UNIT 14107 Address:

MIAMI, FL 331963757 US City-St-Zip:

Title: () Delete FONT, MANUEL I Name:

15067 SW 103 TERRACE, UNIT 14107 Address

City-St-Zip: MIAMI, FL 331963757 US Title: (X) Change () Addition

FONT, ELEONORA Name: Address: 12876 SW 133 TERRACE, City-St-Zip: MIAMI, FL 331863757 US

Title: (X) Change () Addition

ZUCCARO, ALEJANDRO Name: 12876 SW 133 TERRACE Address: MIAMI, FL 331863757 US City-St-Zip:

Title: (X) Change () Addition

Name: FONT, MANUEL I

Address: 12876 SW 133 TERRACE, City-St-Zip: MIAMI, FL 331863757 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Ρ SIGNATURE: ELEONORA FONT 06/04/2006