

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR 27 AM 11:17

DOCUMENT # P94000013228 (9)

1. Corporation Name

RIVERBANK SERVICES, INC.

Principal Place of Business

~~5010 N.W. 33RD AVENUE  
STE 100  
FORT LAUDERDALE FL 33309~~

Mailing Address

~~5010 N.W. 33RD AVENUE  
STE 100  
FORT LAUDERDALE FL 33309~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/15/1994

3a. Date of Last Report

4. FEI Number

650467450

Applied For

Not Applicable

5. Certificate of Status Satisfied

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes

Yes

No

2. Principal Place of Business

21 900 W. OAKLAND PARK  
Suite, Apt. #, etc

2a. Mailing Address

26 A LUD SAME  
Suite, Apt. #, etc

22 # 100  
City & State

23 FT. LAUDERDALE  
Zip

24 FL33311  
Country

27

28 City & State

29

Zip

Country

30

Country

9. Name and Address of Current Registered Agent

ROSABI, STEVE  
~~5010 N.W. 33RD AVENUE  
STE 100  
FORT LAUDERDALE FL 33309~~

10474 NW 11 CT  
PLANTATION  
FL 33322

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of current officer or registered agent and their successor)

(Signature of new registered agent (signature required after 1/1/95))

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: VICE PRESIDENT  
NAME: DANIEL BENJAMIN DR  
STREET ADDRESS: 8527 DYNASTY DR  
CITY, ST, ZIP: MIAMI BEACH FL 33433

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

21 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption or relief provided in Section 199.032, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual reports is true and accurate and that my signature shall have the same legal effect as if made in the state of Florida. I am an officer or director of the corporation or the member or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

*[Handwritten Signature]*

SIGNATURE AND TYPE OR PRINTED NAME OF HIGH OFFICER OR DIRECTOR

2-27-95

305-1649400