

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000089696

FILED  
Jan 17, 2004  
Secretary of State

**Entity Name:** LAW OFFICES OF HECTOR J. RIVERA, ESQUIRE, PROFESSIONAL ASSOCIATION

**Current Principal Place of Business:**

5100 WEST KENNEDY BOULEVARD  
#105  
TAMPA, FL 33609 US

**New Principal Place of Business:**

**Current Mailing Address:**

5100 WEST KENNEDY BOULEVARD  
#105  
TAMPA, FL 33609 US

**New Mailing Address:**

**FEI Number:** 59-3287456

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVERA, HECTOR J.  
5100 WEST KENNEDY BOULEVARD  
SUITE 105  
TAMPA, FL 33609 US

**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: P ( ) Delete  
Name: RIVERA, HECTOR J.  
Address: 5100 WEST KENNEDY BOULEVARD SUITE 105  
City-St-Zip: TAMPA, FL

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

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: HECTOR J. RIVERA

P

01/17/2004

Electronic Signature of Signing Officer or Director

Date