## FILED 2005 FOR PROFIT CORPORATION ANNUAL REPORT - Jan 18, 2005 08:00 AM **Secretary of State DOCUMENT # 250271** 1. Entity Name RIVERSIDE EQUIPMENT CORPORATION Mailing Address Principal Place of Business 2945 NW 21ST TERRACE 2904 N.W. NORTH RIVER DRIVE MIAMI FLA, 33142-7027 US MIAMI, FL 33142-7027 US 01062005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-0948890 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BABUN, JOSE JESUS DO NOT WRITE 2945 NW TERRACE \_ MIAMI, FL 33142 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00

BABUN, SARA CRISTINA

9250 SW 69 ST

MIAMI, FL

PD

BABUN, JOSE

10,

TITLE NAME

NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

OFFICERS AND DIRECTORS

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

3160 NW 14 ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL U00000183185 01/19/05-80058-006 150,00 VSD TITLE BABUN, JOSE JESUS NAME 12711 NW 6 STREET STREET ADDRESS MIAMI, FL ... CITY-ST-ZIP VTD

> DO NOT WRITE IN THIS SPACE

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 of the receiver or true ee 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 address that all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Davtime Phone #

Applied For

Not Applicable