2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

CITY ST-ZIP

SIGNATURE:

Jan 23, 2007 8:00 am **Secretary of State DOCUMENT # 404755** 01-23-2007 90041 001 ***150.00 RIVIERA GENERATOR SERVICE, INC. Principal Place of Business Mailing Address 330 - 10TH STREET LAKE PARK FL 33403 330 - 10TH STREET LAKE PARK FL 33403 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State Applied For City & State 4. FEI Number 59-1417349 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YEAGER, THOMAS J Street Address (P.O. Box Number is Not Acceptable) 1645 PALM BEACH BLVD., STE. 1200 WEST PALM BEACH FL 33401 City Zip Code 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 nunted name of registered agent and title il applicable (NOTE Registered Agent signature registed when reinstating DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HILL ☐ Defete HHE ☐ Change ☐ Addition RAWLINS, ROBERT L NAMI NAM 6553 KATHRINE CT STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415 CHY ST ZP CHY SLZIP ST HILL ☐ Delete HIU ☐ Addition HOLL, WILLIAM HENRY NAME NAM! 401 LAKE SHORE DR #701 STREET ADDRESS STREET ADDRESS LAKE PARK FL CHY ST ZIP CITY ST 7IP HIII Delete Addition T. HOLL MAXINE HOLL, WILLIAM HENRY NAME NAME SHORE DR. #701 401 LAKE SHORE DR #701 401 LAKE STREET LADDRESS STREET ADDRESS CHY SE 70P LAKE PARK FL CITY ST 7IP LAKE PARK, FL. 33403 Delete 11111 ☐ Addition 11111 ☐ Change NAM NAM STREET ADDRESS STREET ADDRESS CHY ST AP CHY SEZIP Delete HILL ☐ Change ☐ Addition NAMI NAME STREET LADDRESS STREET ADDVESS CITY ST ZIP CITY ST ZIP TITLE ☐ Delete HHE ☐ Change ☐ Addition NAME NAM STREET ADDRESS STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 offect as if made under eath; 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.

FILED

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