SECRETARY OF STATE A STATE OF THE STA DIVISION OF CORPORATIONS -CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 00 APR 28 AH 11: 41 DIVISION OF CORPORATIONS DOCUMENT # F94000004102 (9) 1. Corporation Name Glenriver, Inc. Principal Place of Business Mailing Address 1650 SE 17th St. Causeway, Suite 204 Ft. Lauderdale, FL 33316 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 8/8/94 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0507065 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. □ No 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Santangelo, Carl G. Street Address (P.O. Box Number is Not Acceptable) 3000 N. Federal Highway Bldg. 2, Ste. 200' 83 Ft. Lauderdale, FL 33305 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition TITLE DELETE 1.1 TITLE Change Koach, Glenn 000003251080--2 NAME 12 NAME 1650 SE 17th St. Causeway 204 -05/12/00--01111--001 STREET ADDRESS 13 STREET ADDRESS Ft. Lauderdale, FL 33316 ****158.75 ****158<u>.</u>75 CITY- ST- ZIP 14 CITY-ST-ZIP Addition Change DELETE TITLE 2! TITLE NAME 22 NAME Ryan, Thomas STREET ADDRESS 2.3 STREET ADDRESS 1650 SE 17th St. Causeway 204 Ft. Lauderdale, FL 33316 017Y-57-21P 2.4 CITY-ST-ZIP Addition X DELETE Change . TITLE J1 TITLE Massey, Stephen 1650 SE 17th St. Causeway 204 32 NAME MAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP Ft. Lauderdale, FL 33316 34 CITY-ST-ZIP DELETE Change Addition 7/71.5 41 TIBLE 4.2 NAME SAME TREET ADDRESS. 4 3 STREET ADDRESS JTY- 3T- 2 P A A COTY-ST-ZIP

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under bath; that I am on officer or director of the corporation or the receiver or trustee empowered of execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Slock 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

64 CTY-ST-ZIP

5.1 TITLE 5.2 NAME

61 TITLE

62 NAME

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5.4 C:TY-ST-ZIP

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