FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

FILED Feb 25 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # F99642 (3) RIVAS MOBILE CORPORATION Mailing Address **Principal Place of Business** % JOSE A RIVAS 2390 S.W. 57TH AVE % JOSE A RIVAS 2390 S.W. 57TH AVE. DO NOT WRITE IN THIS SPACE MIAMI FL 33155 MIAMI FL 33155 3. Date Incorporated or Qualified 09/14/1982 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-2250250 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RIVAS, JOSE A. 2390 S.W. 57TH AVE. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33155** 83 City 84 Zip Code 85 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 State 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 (NOTE Fingistered Agent signature when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DP DELETE Change Addition 1.1 TITLE TITLE RIVAS, JOSE A NAME **1.2 NAME** 2390 S W 57TH AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI, FL 00000 CITY - ST - ZIP 14 CITY - ST - ZIP DELLIE Change ☐ Addition DSC 2.1 TITLE TITLE RIVAS, MARTA A 22 NAME NAME 2390 S W 57TH AVE 2 3 STREET ADDRESS STREET ADDRESS MIAMI, FL 00000 2 4 CITY - ST-ZIP CITY-ST-ZIP 🔲 DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-S1-2IP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STHEET ADDRESS 54 CITY-ST-ZIP CITY - ST-ZIP DESETT Change ___ Addition 6.1 TITLE TITLE

6.2 NAME

6.3 STREET ADDRESS

14. Thereby 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 arrival 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 or the face of organized 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 or air attempted with an address. 2/12/98(305)2663745