


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # K02734

1. Entity Name
MIAMI RIVER GROUP, INC.



Principal Place of Business
**64 SE 4TH STREET
MIAMI, FL 33137**

Mailing Address
**64 SE 4TH STREET
MIAMI, FL 33137**

DO NOT WRITE IN THIS SPACE



01082004 No Chg-P CR2E034 (18/03)

4. FEI Number
65-0017088

Applied For
 Not Applicable

5. Certificate of Status Desired **\$6.75** Additional Fee Required

6. Name and Address of Current Registered Agent:

**NAKHJAVAN, BIJAN
2001 HALSISSEE STREET
MIAMI, FL 33133**

158-75

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6. 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, if applicable, (NOTE: Registered Agent Signature required when returning) DATE

FILE NOW!!! FEE IS \$150.00
AFTER MAY 1, 2004 Fee will be \$200.00

7. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fee

10. OFFICERS AND DIRECTORS

TITLE PO	NAKHJAVAN, BIJAN
NAME	2810 HALISSEE DR
STREET ADDRESS	MIAMI, FL
CITY-ST-ZIP	
TITLE VP	ROUHANI, FARHANG
NAME	212 SHORE DR, SOUTH
STREET ADDRESS	MIAMI, FL 33139
CITY-ST-ZIP	
TITLE T	NAKHJAVAN, ARLETTE
NAME	2001 HALISSEE STREET
STREET ADDRESS	MIAMI, FL 33133
CITY-ST-ZIP	
TITLE S	PRICE, IRA B
NAME	9150 SOUTH DADELAND BLVD., #1705
STREET ADDRESS	MIAMI, FL
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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 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 employment.

SIGNATURE: _____ *04-04-04* _____
Signature and typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent Signature required when returning) DATE