


2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

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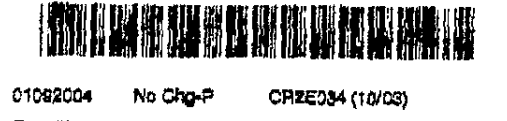
1. Entity Name
MIAMI RIVER GROUP, INC.



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



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 HALISSÉE STREET
MIAMI, FL 33133**

158-75

DO NOT WRITE IN THIS SPACE

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 | |

DO NOT WRITE IN THIS SPACE

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04/12/04-80073-010 158.75

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 filer, date, and address, outside of Florida