## **2001 UNIFORM BUSINESS REPORT (UBR)**

Saday G. Rivera

SIGNATURE AND TYPED OR PRINTED

SIGNATURE:

## **FILED** Jan 31, 2001 8:00 am Secretary of State DOCUMENT # P0000074807 1. Entity Name RIVERS CONSTRUCTION CORPORATION 01-31-2001 90325 039 \*\*\*150.00 Principal Place of Business Mailing Address 1404 S.W. 104 COURT 1404 S.W. 104 COURT MIAMI FL 33174 MIAMI FL 33174 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 65-1036061 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name RIVERA, SADAY G Street Address (P.O. Box Number is Not Acceptable) 1404 S.W. 104 COURT **MIAMI FL 33174** Zip Code FL 8. The above named entity nt for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PD TITLE ☐ Delete TITLE ☐ Addition RIVERA, FRANCISCO E NAME NAME STREET ADDRESS 1404 S.W. 104 COURT STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33174** CITY-ST-ZIP VPTD TITLE ☐ Defete TITLE ☐ Change ☐ Addition RIVERA, SADAY G NAME NAME 1404 S.W. 104 COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33174 CITY-ST-ZIP SD:- ----TITLE Delete TITLE Change ☐ Addition RIVERA. GLADYS NAME NAME 1404 S.W. 104 COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33174** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does no indicated on this report or supplemental report is true and accuracy qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an officer or director quired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or trustee empowered to exec changed, or on an attachment with an address, with all other lij

Jan. 22, 2001