

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000097262

FILED
Mar 24, 2004
Secretary of State

Entity Name: RIVERA DYM CORP.

Current Principal Place of Business:

1145 FAIRLAKE TRACE
APT. 1807
WESTON, FL 33326

New Principal Place of Business:

1792 BELL TOWER LANE
WESTON, FL 33326

Current Mailing Address:

318 INDIAN TRACE
150
WESTON, FL 33326

New Mailing Address:

1792 BELL TOWER LANE
WESTON, FL 33326

FEI Number: 80-0062557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DELGADO, PEDRO P CPA
1320 SOUTH DIXIE HIGHWAY
SUITE 220
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

SHAPIRO, JAY S CPA
1625 N COMMERCE PKWY
SUITE 225
WESTON, FL 333326 US

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.

SIGNATURE: JAY S. SHAPIRO

03/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIVERA, MAURO A
Address: 1145 FAIRLAKE TRACE #1807
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RIVERA, MAURO A
Address: 1792 BELL TOWER LANE
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAURO A. RIVERA

P

03/24/2004

Electronic Signature of Signing Officer or Director

Date