

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111659

Entity Name: CLAUDIO RIVERO, P.A.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

1555 N TREASURE DRIVE #510
NORTH BAY VILLAGE, FL 33141

New Principal Place of Business:

335 SOUTH BISCAYNE BLVD #180
MIAMI, FL 33131

Current Mailing Address:

1555 N TREASURE DRIVE #510
NORTH BAY VILLAGE, FL 33141

New Mailing Address:

335 SOUTH BISCAYNE BLVD #180
MIAMI, FL 33131

FEI Number: 46-0504954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORSHER, ALEKSANDR
2422 NE 9 STREET
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

CLAUDIO, RIVERO
335 SOUTH BISCAYNE BLVD #180
MIAMI, FL 33131 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: CLAUDIO RIVERO

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIVERO, CLAUDIO
Address: 1355 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RIVERO, CLAUDIO
Address: 335 SOUTH BISCAYNE BLVD #180
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CLAUDIO RIVERO

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date