

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

8/21

FILED
Sep 15, 2004 8:00 am
Secretary of State

08-26-2004 90002 003 ***150.00

DOCUMENT # P03000022174

1. Entity Name

RIVERA'S FITNESS SERVICES, INC.



Principal Place of Business

4825 ANN DRIVE
HOLIDAY FL 34690

Mailing Address

4825 ANN DRIVE
HOLIDAY FL 34690

66433695



MOORE

CR2E034 (4/04)

2. Principal Place of Business

3009 N. Morgan St.

Suite, Apt. #, etc.

3. Mailing Address

3009 N. Morgan St.

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33603

Country

City & State

Tampa FL

Zip

33603

Country

4. FEI Number

13-4243331

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RIVERA, ESTHER
3009 N MORGAN STREET
TAMPA FL 33603

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

3009 N. Morgan St

City

Tampa

FL

Zip Code

33603

8. 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME RIVERA, ENRIQUE E
STREET ADDRESS 4825 ANN DRIVE
CITY-ST-ZIP HOLIDAY FL 34690 ☒ Delete

TITLE VD
NAME RIVERA, IDELFONSO
STREET ADDRESS 3009 N MORGAN STREET
CITY-ST-ZIP TAMPA FL 33603 ☐ Delete

TITLE TD
NAME RIVERA, ROSEMARY
STREET ADDRESS 3009 N MORGAN STREET
CITY-ST-ZIP TAMPA FL 33603 ☒ Delete

TITLE SD
NAME RIVERA, ESTHER
STREET ADDRESS 3009 N MORGAN STREET
CITY-ST-ZIP TAMPA FL 33603 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 empowered.

SIGNATURE:

Enrique Rivera

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

66433695

Division Of Corporation
P.O. Box 6327
Tallahassee, FL. 32314

September 9, 2004

RE: Rivera's Fitness Services, Inc.
#P03000022174

Dear Sir:

Please be advised that Rivera's Fitness Services, Inc. mailing address changed. We did not receive the initial annual notice. Therefore, we are asking that you waive any additional fees at this time.

Respectfully,



Ester Rivera
President