2006 FOR PROFIT CORPORATION

FILED May 03, 2006 8:00 am Secretary of State

ARNOAL KLI OKI					_					
DOCUMENT # P0300068603 1. Entity Name RIVERFRONT EQUITIES REALTY, INC.					05-03-2006 90240 009 ***150.00					
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Principal Plac 2925 W. SR LONGWOOD,	434, SUITE 111	9	tailing Address 2925 W. SR 434, SUITE 111 .ONGWOOD, FL 32779					_		
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Principal Place of Business 3. Mailing Address										
1000 d Magnilia Ave 1000 N Magnilia					1 18 8 (18 8) (11 8	#100 ISIII ##IJI ##III ##II	i weste antibi in	tim Anth Matemati	IB \$1 13 (BB)	
Suite, Apt. #, etc. O Suite, Apt. #, etc.										
8					01262006	Chg-P	CR2E0	34 (11/05)		
City & State City & State					4. FEI Number				plied For	
Orlando H Orlando H					65-1195			<u> </u>	t Applicable	
7in	Country	Zip Zip	Country		00-1100					
32803	2/SA	32803	USA		5. Certificate of	f Status Desired		\$8.75 Add Fee Required		
			asir		7 11					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
Name										
	ENNETH D ESQ.		Street A	Stroot Address (R.O. Box Number in Alet Agreements)						
	ANGE AVE., SUITE 2100		SileerA	Street Address (P.O. Box Number is Not Acceptable)						
ORLANDO), FL 32801							-		
			City				FL	Zip Code	9	
	V-004									
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office or	register	ed agent, or both	, in the State of Flo	rida. 1am	familiar with,	and accept	
the obligat	ions of registered agent.									
SIĞNATURE.	Signature, typed or printed name of registered agent as	nd title if soplicable. (NOTE:	Registered Agent signsti	re required	when reinstation)		DATE			
		(10.0)	- again a right again		, mentersauling)		DATE			
		9. Election Campaig	• Cii	**						
	E NOW!!! FEE IS \$150.00	تَانَيف سا سا	~ —		.00 May Be ed to Fees				İ	
AILEI WI	ay 1, 2006 Fee will be \$550.0	1105t 1 dive Commi	30.1011	Haa	00 10 1 403					
10.	OFFICERS AND D	DIRECTORS	11,		ADDITIONS/C	HANGES TO OFFI	CERS AND	DIRECTORS	S IN 11	
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0111-31-211	LONGWOOD, TE 32779		CITY-ST-ZIP	v_r	lando, t	C 32803	•			
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12. I hereby	certify that the information supplied with t	this filing does not qualify for	the exemptions c	ontained	in Chapter 119,	Florida Statutes, I	further cert	ify that the in	formation	
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										
of the corporation of the receiver of itustee empowered to execute this report as required by Chapter 507, Horida 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: 425-06 407-689-9730										
SIGNAT	URF: A				429	F06	400	-1-19-6	25 2/3	
	VIII.					- '		10111	<u>/</u>	