## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 30, 2004 8:00 am Secretary of State **DOCUMENT # P03000090279** 04-30-2004 90219 024 \*\*\*150.00 RIVIERA DELICATESSEN, INC. Principal Place of Business Mailing Address 94073927 1290 GULF BOULEVARD 1290 GULF BOULEVARD LIGHTHOUSE TOWER #1105 LIGHTHOUSE TOWER #1105 CLEARWATER, FL 33767 CLEARWATER, FL 33767 2. Principal Place of Business 3. Mailing Address 1201 Marketerd Drive 2657 Ulmertan Suite, Apt. #, etc. Suite, Apt. #, etc. 04212004 CR2E034 (10/03) Chg-P City & State City & State Applied For 4. FEI Number FL Tampa 51- 047*831*0 Treavoite Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33762 USA 3626 WA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -- --COHRS, DENIS A. COHRS, DENIS A Street Address (P.O. Box Number is Not Acceptable) 2575 ULMERTON ROAD 2575 ULMERTON ROAD SUITE 210 TOWER #1105 CLEARWATER, FL 33762 SUITE 210 City Zip Code CLEARWATER 33762 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE TITLE **√** Change □ Addition URBACH, ERIC MAME NAME URBACH, ERICH 12201 Harsle heed Drive 1290 GULF BOULEVARD #1105 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33767 · CITY-ST-ZIP FL 33616 TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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. LOY

SIGNATURE:

Erich J'Urbach

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