2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000131209

FILED Apr 22, 2005 08:00 AM Secretary of State

1. Entity Nan RIVA DE	ne NBURG, INC.				
4510 NORT	ce of Business H MERIDIAN AVE. H, FL 33140	Mailing Address 4510 NORTH MERIDIAN AVE. MIAMI BEACH, FL 33140			
	OO NOT WRITE	DO NOT WRITE			
	5. Name and Address of Current R	egistered Agent		Fee Required	
MOFFA, JOHN A 7800 W. OAKLAND PARK BLVD., E-214 SUNRISE, FL 33351			DO NOT WRITE IN THIS SPACE		
	e named entity submits this statement for tions of registered agent. Signature, lyped or printed name of registered agent an	_		registered agent, or both, in the State of Florida. I am familiar with, and a	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Fina	ncing	\$5.00 May Be Added to Fees	
10.	ÖFFICERS AND D	RECTORS		and the second s	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D DENBURG, RIVA 4510 NORTH MERIDIAN AVE. MIAMI BEACH, FL 33140		- <u></u>	U00000323392 04/22/05-80052-0 06 15 0	

IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 flustee 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

315.579.57

DO NOT WRITE

Daytime Phone #