## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

ATURE AND TYPED OR PRINTED NA

## Apr 14, 2005 08:00 AM Secretary of State **DOCUMENT # P03000153496** 1. Entity Name RIM GUYS INC. Principal Place of Business Mailing Address 16065 N.W. 57 AVENUE 16065 N.W. 57 AVENUE HIALEAH, FL 33014 HIALEAH, FL 33014 CR2E034 (10/03) No Chg-P 04112005 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE RIVERO, TANIA 16065 N.W. 57 AVENUE HIALEAH, FL 33014 IN THIS SPACE 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, typed or printed name of registered agent and fille if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE RIVEN, TANIA NAME U00000304384 04/14/05-80040-020 150.00 STREET ADDRESS 16065 NW 57 AVE CITY-ST-ZIP HIALEAH, FL 33014 TITLE RIVEN, MARCOS O NAME STREET ADDRESS 16065 NW 57 AVE CITY ST-ZIP HIALEAH, FL 33014 NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)[f). 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 of trusted 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.

E OF SIGNING OFFICER OR DIRECTOR

**FILED** 

305-474-453