2007 FOR PROFIT CORPORATION

FILED Feb 08. 2007 08:00 AM

ANNUAL REPORT				Teb 00, 2007 00:00 F			
1. Entity Nam	MENT # P050001418 RIVE NOW, INC.	310			Sec	cretar	y of State
Principal Plac 10 NORMAN UNIT 3 AUBURNDAL		Mailing Address 10 NORMAN LANE UNIT 3 AUBURNDALE, FL 33823		Grand			
DO NOT WRITE IN THIS SPA			CE	01232007 4. FEI Numb 20-365		CR2E034	
146 AMBE AUBURNE 8. The above the obligat	PASCUAL	DO NOT WRITE IN THIS SPACE red office or registered agent, or both, in the State of Florida. I am familiar with, and accept //23/07					
SIGNATURE. FIL	Signature, typed of printed name of repeland agent and E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Fina	ed Agent signature required	.00 May Be led to Fees		DATE	
10. YITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI D CASTRO, PASCUAL 146 AMBER BLVD, AUBURNDALE, FL 33823		(100000628112 02/16/07-80002-004 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE			
TITLE HAME STREET ADDRESS CITY-ST-ZIP							
+ 7 Clarks			_				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 by 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 storess, with all officer like empowered.

SIGNATURE:

KAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #