2005 FOR PROFIT CORPORATION

FILED Mar 09, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P94000013231 1. Entity Name RIVERBANK, INC. Principal Place of Business Mailing Address 800 W OAKLAND PARK BLVD 800 W OAKLAND PARK BLVD #100 #100 FORT LAUDERDALE, FL 33311 FORT LAUDERDALE, FL 33311 US 02142005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0467447 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent RASABI, STEVE DO NOT WRITE 800 W OAKLAND PK BLVD **STE 100** IN THIS SPACE FORT LAUDERDALE, FL 33311 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 fille if applicable (NOTE Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. TITLE NAME RASABI, STEVE 800 W OAKLAND PK BLVD STE 100 STREET ADDRESS U00000256525 CMY-ST-ZIP FORT LAUDERDALE, FL 33311 03/09/05-80018-012 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 legial effect as if made under eath, 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 affactment with an address, with pall other like empowered.

CITY-ST-ZIP TITLE NAME STREET ADDRESS City-St-Zip

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING