

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000013670

FILED
Apr 28, 2005
Secretary of State

Entity Name: RIVERSIDE GROUP ENTERPRISES, INC.

Current Principal Place of Business:

6789 W. FLAGLER ST.
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

306 ALCAZAR AVENUE
SUITE 302
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 65-0507889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VEGA, ALBERT
306 ALCAZAR AVE
SUITE 302
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VEGA, ALBERTO P
Address: 8550 S.W. 27 LN.
City-St-Zip: MIAMI, FL 33155

Title: VPST (X) Delete
Name: VEGA, MARISOL
Address: 8550 S.W. 27 LN.
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BORREGO, LAUDELINA
Address: 6789 W FLAGLER ST
City-St-Zip: MIAMI, FL 33144

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAUDELINA BORREGO

P

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date