## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000044100 (3)

FIVE RIVERS ENTERPRISES, INC.

Principal Place of Business		Mailing Address		I PERDINADI SUR JURSI DIRIH RRISH BRISH BRISH RUSHI RUBER UNDIN BRISH KUMI INDRI		
328 EASTWOOD TERRACE BOCA RATON FL 33431		328 EASTWOOD TERRACE BOCA RATON FL 33431-8261		f		
					3. Date Incorporated or Qualified 06/13/1994	3a, Date of Last Report 04/29/1996
2. Principal P	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0498201	Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			'.	SR 75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	Z <sub>I</sub> p	Countr	у	Trust Fund Contribution  8. This corporation has liability for in	Added to Fees
24	25		10	-	· · · · · · · · · · · · · · · · · · ·	Yes No
	g, Name and Address of Currer	nt Registered Agent		1	10. Name and Address of New Reg	istered Agent
	S, JOSE		81	Name		
328 EASTWOOD TERRACE BOCA RATON FL 33431			62 Street Ad		dress (P.Ö. Box Number is Not Acceptable)	
500	A MION FL SOUST		63	1	The state of the s	
			84	City		■■ 85 Zip Code
				,		FL
11. Pursuant office or r agent. La	to the provisions of Sections 607,050 egistered agent, or both, in the State in familiar with, and accept the oblig	l2 and 607,1508, Florida Statutes of Florida. Such change was au ations of, Section 607,0505, Flori	s, the above thorized back da Statute	re-named o y the corpo is.	corporation submits this statement for the purion or the purion of the p	rpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or portent name of registered age	ont and title 4 armicable (NOTE:	Rapietared Ar	ect elonatura	equired when reinstating)	DATE
12.	OFFICERS AN		13.	erit signature i	ADDITIONS/CHANGES TO OFFICE	
THE	PD	DELETE	1 1 TITLE	T		☐ Change ☐ Addition
NAME	RIOS, JOSE		12 NAME			
STREET ADDRESS	328 EASTWOOD TERRACE BOCA RATON FL 33431		1	t address		
CITY-ST ZiP TiTLE	VD	DELETE	1.4 CITY- 21 TITLE	ST-ZIP		Change Addition
NAME	RIOS, SUSANA	בן טנננונ	2 2 NAME			C) change C] xodition
STREET ADDRESS	328 EASTWOOD TERRACE		1	T ADDRESS	•	
CITY - ST - ZIF	BOCA RATON FL 33431		2.4 CiTY-	ľ		
TOTALE		DELETE	3 1 TITLE			Change Addition
NAME			3 2 NAME			
STREET ADORESS				T ADDRESS		
CITY+ST+ZIP TITLE	Above	DELETE	3.4. CITY -	ST-ZIP		Change Addition
NAME		had becale	4.1 IIILE 4. 2 NAME			Fin Change To Adollion
STREET ADORESS			B	T ADDRESS		
CITY-S1-ZIP			4.4 CITY~	- 1		
TiTLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-\$1-ZIP TITLE		DELETE	5.4 CITY - 6.1 TITLE	ST-ZIP		Change Addition
NAME		Las vicere	6.2 NAME			The American
STREET ADDRESS				T ADDRESS		
			1			

SIGNATURE

JUSE RIOS

INING/OFFICER OR DIRECTOR

14. I do 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 annual report or supplemental annual 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 to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

2/24/97 561-

561-394-3786

**FILED** 

Feb 28 1997 8:00am

Secretary of State