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

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000044100 (3)

Country

g. Name and Address of Current Registered Agent

25

FIVE RIVERS ENTERPRISES, INC.

Principal Place of Business	Mailing Address
328 EASTWOOD TERRACE	328 EASTWOOD TERRACE
BOCA RATON FL 33431	BOCA RATON FL 33431

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

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## FILED Mar 02 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

☐ Yes

8. This corporation owes or has paid the current year intengible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ No

Not Applicable

3. Date Incorporated or Qualified

06/13/1994

65-0498201

5. Certificate of Status Desired

8. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

4. FEI Number

RIOS, JOSE 328 EASTWOOD TERRACE BOCA RATON FL 33431			B1	Name						
			82	Street	Street Address (P.O. Box Number is Not Acceptable)					
		,	83							
			84	City	FL.	85	Zip Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature, lyped or punied name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE										
12.	OFFICERS AND DI		13.	eni signatura	ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS IN 12	{		
TITLE	PD	☐ DELETE	1,1 TITLE		7,05,110,140,01,114,020,70 0.1,102,140,141,0	Chan				
NAME	RIOS, JOSE	•	1.2 NAME			`				
STREET ADDRESS	328 EASTWOOD TERRACE		1.3 STREET ADDRE							
CITY-ST-ZIP	BOCA RATON FL 33431		1.4 CITY - S	T - Z(P				۶		
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NAME	RIOS, SUSANA		2.2 NAME					ľ		
STREET ADDRESS	328 EASTWOOD TERRACE		2.3 STREET	ADDRESS						
CITY-ST-ZIP	BOCA RATON FL 33431		2.4 CITY-	ST-ZIP				)		
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NAME			6.2 NAME	1				ļ		
STREET ADDRESS			6.3 STREET	ADDRESS						
CITY-ST-ZIP		·	6.4 CITY-S							
14. Thereby 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 of 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.										

Country

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