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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400062582

1. Corporation Name

RIVERSIDE PRODUCTIONS, INC.

Principal Place of Business									
3685 A INVESTMENT LANE. #6									
RIVIERA BEACH FL 33404									

Mailing Address

3685 A INVESTMENT LANE. #6 RIVIERA BEACH FL 33404

May 05, 1999 8:00 am Secretary of State

05-05-1999 90079 037 ***150.00



							DO NOT WRITE IN THIS SPACE				
							3.	. Date Incorporated or Qualifed			İ
							}	08/22/1994			
2. Principal Pl	lace of Business	2a.	2a. Mailing Address				4.	4. FEI Number			pplied For
21		26						<u>65-0514577</u>			lot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					Certifcate of Status Desired		+	Additional
22							_ 3.	. Certificate of Status Desired		Fee F	Required
City & State City & State				е			6.	Election Campaign Financing	П	\$5.00	May Be
23		28						Trust Fund Contribution		Added	to Fees
Zip	Country		Zip	Cou	ıntry		8.	. This corporation owes the curre			
24	25	29		30				Personal Property Tax.		Yes	□No
	9. Name and Address of Currer	nt Regis	stered Agent		L,		10.	Name and Address of New R	Registered /	Agent	
					81	Name					
	SON, MAC ROBINSON				82 Street Address (P.O. Box Number is Not Acceptable)						
ľ	GLEN RD				Street Address (P.O. Box Number is Not Acceptable)						
(W P/	ALM BEACH FL 33406				83						
					84	City				85 Zip	Code
ì						\			<u> </u>		
11. Pursuant	to the provisions of Sections 607,050 egistered agent, or both, in the State)2 and 6	07.1508, Florida Statute	s, the a	bove	3-named co	orporatio	on submits this statement for the	purpose of a	changing i Itment as i	ts registered registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	tions of	, Section 607.0505, Flori	da Stat	utes		allon's D	bald by directors. Thoreby booch	it wie appen		9.0.0
SIGNATURE											
SIGNATURE	Signature, typed or printed name of registered age	nt and title	if applicable. (NOTE: I	Registered	d Age	nt signature requ			DATE		
12.	OFFICERS AN	D DIRE		13.				ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	PD		☐ DELETE	1.1 Ti	ITLE					Change	Addition
NAME (HUTSON, MAC ROBINSON			1,2 N	AME						
STREET ADDRESS	1400 GLEN ROAD			1.3 S	TREET	TADORESS					
CITY-ST-ZIP	WEST PALM BEACH FL 33406	i		140	πy-si	T-ZIP					
TITLE	VPD		☐ DELETE	2.1 T	TLE					Change	e
NAME .	DELORENZO, CHRISTIAN A			2.2 N	AME	- 1					
STREET ADDRESS	1400 GLEN ROAD			2.3 S	TREE1	TADORESS					
CITY-ST-ZIP	WEST PALM BEACH FL 33406	;		2.40	CITY-S	ST-ZIP					
TITLE	TD		☐ DELETE	3.1 7			· <u> </u>			Change	Addition
NAME	YULO, RALPH			3.2 N	AME.	{					l
STREET ADDRESS	326 JUPITER LAKES BLVD., #	2311-A				TADDRESS					
CITY-ST-ZIP	JUPITER FL 33458			•		ST-ZIP					
TITLE	SD		☐ DELETE	4.1 Ti			_			Change	Addition
NAME	YULO, STEPHEN		<u> </u>	1	VAME						
! !	326 JUPITER LAKES BLVD., #	2211.A		•		TADDRESS					
STREET ADDRESS	JUPITER FL 33458	EU1174	1			1					
CITY-ST-ZIP	JUFFIER FL 00400		☐ DELETE	5.1 T	TY-S	1-71-				Change	Addition
TITLE				5.1 N		}					_
NAME						T ADDRESS					
STREET ADDRESS											
CITY-ST-ZIP			Design	5.4 C	ITY-S	ZIP				Change	Addition
TITLE			☐ DELETE								
NAME				6.2 N							į
STREET ADDRESS						T ADDRESS					
CITY-ST-ZIP				6.4 C	TY-S	T-ZiP					

14. 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 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, with all other like empowered.

SIGNATURE: