
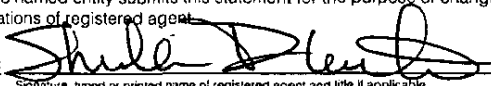
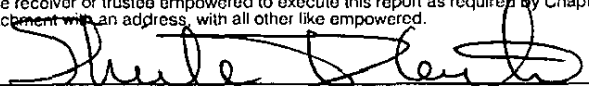


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90107 025 ***150.00

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|---|---|-------------------------------------|---|---|--|
| DOCUMENT # P95000045657 | | | |  | |
| 1. Entity Name RIVERS BOATEN'S & STUFF... INC. | | | | | |
| Principal Place of Business 1404 59TH AVENUE E #7 BRADENTON, FL 34203 | | | Mailing Address 1404 59TH AVENUE E #7 BRADENTON, FL 34203 | | |
| 2. Principal Place of Business 2420 Manatee Ave E | | 3. Mailing Address ← Same | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State Bradenton FL | | City & State | | 4. FEI Number 04212005 Chg-P CR2E034 (10/03) 65-0600937 | |
| Zip 34208 | | Country Manatee | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent BAYSIDE MARINE COSMETICS & REPAIR, INC 1404 59TH AVENUE EAST UNIT 7 BRADENTON, FL 34203 | | | 7. Name and Address of New Registered Agent Name Sheila DiCarlo Street Address (P.O. Box Number is Not Acceptable) 2420 Manatee Ave E City Bradenton FL 34208 | | |
| 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  DATE 4/21/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | |
| 10. OFFICERS AND DIRECTORS | | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P DI CARLO, SHEILA 1404 59TH AVENUE EAST #7 BRADENTON, FL 34203 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2420 Manatee Ave E Bradenton FL 34208 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP DI CARLO, PHILLIP W. 1404 59TH AVENUE EAST #7 BRADENTON, FL 34203 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2420 Manatee Ave E Bradenton FL 34208 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE:  | | | | Date 4/21/05 941-747-8984 <small>Daytime Phone #</small> | |