

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2004 8:00 am
Secretary of State

04-28-2004 90169 035 ***150.00

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1. Entity Name
FESTIVEI CORPORATION



Principal Place of Business
**1700 NORTHWEST NORTH RIVER DRIVE
RIVER RUN SUITE 1002
MIAMI, FL 33125**

Mailing Address
**1700 NORTHWEST NORTH RIVER DRIVE
RIVER RUN SUITE 1002
MIAMI, FL 33125**

DO NOT WRITE IN THIS SPACE



04042004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0633922

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES, FL 33134**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PSD**
NAME **RIVERA, VICTOR ELLIOTT**
STREET ADDRESS **1700 NORTHWEST NORTH RIVER DRIVE**
CITY-ST-ZIP **MIAMI, FL 33125**

TITLE **VTD**
NAME **LAWRENCE, RICHARD ALAN**
STREET ADDRESS **1700 NORTHWEST NORTH RIVER DRIVE**
CITY-ST-ZIP **MIAMI, FL 33125**

TITLE _____
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE _____
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE _____
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CITY-ST-ZIP _____

TITLE _____
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

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IN THIS SPACE**

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: RICHARD ALAN LAWRENCE

UTD MAY 10, 2004 305863-433X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #