

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000038708

FILED
Oct 29, 2004
Secretary of State

Entity Name: RIDER TRADE OF FLORIDA, INC.

Current Principal Place of Business:

16751 N.E. 9TH AVENUE
SUITE 403
N. MIAMI BEACH, FL 33162 US

New Principal Place of Business:

Current Mailing Address:

16751 N.E. 9TH AVENUE
SUITE 403
N. MIAMI BEACH, FL 33162 US

New Mailing Address:

FEI Number: 65-0662747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIORILLO, DANIEL E
16751 NE 9TH AVE
APT 403
MIAMI, FL 33162 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FIORILLO, DANIEL
Address: 16751 NE 9TH AVENUE APT 403
City-St-Zip: MIAMI, FL 33162

Title: DV () Delete
Name: FIORILLO, RAQUEL
Address: 1475 N.E. 125 TERRACE - APT.#507
City-St-Zip: NORTH MIAMI, FL 33161

Title: DT () Delete
Name: FIORILLO, EDUARDO
Address: 1475 N.E. 125 TERRACE - APT.#507
City-St-Zip: NORTH MIAMI, FL 33161

Title: DS () Delete
Name: CASTILLO, MARIA I
Address: EPIF EL BOSQUE I, URB EL BOSQUE 3-1
City-St-Zip: MARACAY2102,ARAGUA,VENEZUELA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL E. FIORILLO

PRES

10/29/2004

Electronic Signature of Signing Officer or Director

_____ Date