

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P96000049494

1. Entity Name  
RIO BOCA, INC.



Principal Place of Business  
7777 GLADES ROAD #310  
BOCA RATON, FL 33434

Mailing Address  
7777 GLADES ROAD #310  
BOCA RATON, FL 33434



01032005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0671324

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

SCHMIER, ROBERT J  
7777 GLADES ROAD #310  
BOCA RATON, FL 33434

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U00000343988  
04/29/05-80119-015 158.75

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME SCHMIER, ROBERT J  
STREET ADDRESS 7777 GLADES ROAD #310  
CITY - ST - ZIP BOCA RATON, FL 33434

TITLE CEOS  
NAME FEURRING, DOUGLAS R  
STREET ADDRESS 7777 GLADES ROAD #310  
CITY - ST - ZIP BOCA RATON, FL

TITLE T  
NAME LOPEZ, KATHRYN A  
STREET ADDRESS 7777 GLADES ROAD #310  
CITY - ST - ZIP BOCA RATON, FL 33434

TITLE  
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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:

*Robert J. Schmier*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28, 2005

Date

561-483-8400

Daytime Phone #

Robert J. Schmier, Pres.