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

PROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29 1998 8:00am
Secretary of State

DOCUMENT # P97000013888 (7)
1. Corporation Name

RIVERVIEW RENTAL ENTERPRISES, INC.

Principal Place of Business	Mailing Address
PO BOX 912 RIVERVIEW FL 33568	PO BOX 912 RIVERVIEW FL 33568

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/12/1997

4. FEI Number **59- 3443135** — Applied For / Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

	2. Principal Place of Business	2a. Mailing Address
21		26
Suite, Apt. #, etc.	22	Suite, Apt #, etc.	27
City & State	23	City & State	28
Zip	24	Country	25	Zip	29	Country	30

9. Name and Address of Current Registered Agent

PICKARD, DANIEL J
10607 DIXON DR
RIVERVIEW FL 33569

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City   **FL**   85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____

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

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PT	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	PICKARD, DANIEL J		1.2 NAME			
STREET ADDRESS	10607 DIXON DRIVE		1.3 STREET ADDRESS			
CITY-ST-ZIP	RIVERVIEW FL 33569		1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

CR2E034 (10/97)

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.

SIGNATURE _____ Daniel J Pickard _____ 4/18/98 _____