

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90057 010 ***150.00

DOCUMENT # P97000086510

1. Entity Name

RIVERWALK NUTRITION CENTER, INC.

Principal Place of Business

**5703 N UNIVERSITY DR
 TAMARAC FL 33321
 US**

Mailing Address

**5703 N UNIVERSITY DR
 TAMARAC FL 33321-4635
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0786052

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RODRIGUEZ, MIGUEL J
 4801 S UNIVERSITY DR, STE 3000
 DAVIE FL 33328**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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
D	YIBIRIN, BERNARDO	5707 N UNIVERSITY DRIVE	TAMARAC FL 33321	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	YIBIRIN, MARIA R	5707 N UNIVERSITY DRIVE	TAMARAC FL 33321	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	YIBIRIN, SERGIO	5707 N UNIVERSITY DRIVE	TAMARAC FL 33321	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	YIBIRIN, GINETH M	5707 N UNIVERSITY DRIVE	TAMARAC FL 33321	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sergio Yibirin
 SERGIO YIBIRIN

3-7-00

954 720 2626

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

03/20/00 10:00 AM