PROFIT ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000001939 1. Corporation Name MANATER RIVERREND, INC.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90173 019 ***150.00

IVINICATE	E NIVERDENU, INC.												
Principal Place	e of Business	Mailin	ng Address				\neg	1 : 22/12/2	. 100 amili e 81() 6		11, SP14 P		· · · · · · · · · · · · · · · · · · ·
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Suite, Apt	#, elc	⊢ ¬	uite;-Apt-#;-etc				5.	Certificate of	Status Desir	□ be	ĺ	•	Additional
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<u> </u>	9. Name and Address of Cu	ment Kedisten	au Agent		81	Name		Maille Biro /	1001000		D. C. D. C. P.		
MOU	iser, frederick l												
A .	BOX 20768				82	Street Ac	ddress (P	O. Box Num	ber is Not Ad	ceptable)	ı		
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11. Pursuant	to the provisions of Sections 607.	.0502 and 607.	1508, Florida Statu	ites, the a	above	named co	orporation ation's bo	n submits this pand of directo	statement fors. I hereby	or the purp accept the	ose of o	changing it itment as r	s registered egistered
11, Pursuant office or r agent. I a	to the provisions of Sections 607 egistered agent, or both, in the Sim familiar with, and accept the ot	.0502 and 607. tate of Florida. oligations of, Se	1508, Florida Statu Such change was ection 607,0505, Fl	ites, the a authorize orida Sta	bove d by t	named corpora	orporation ation's bo	n submits this pard of directo	statement for ors, I hereby	or the purp accept the	ose of o	changing it itment as r	s registered egistered
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SIGNATURE	Signature, typed or printed name of registered OFFICERS	nigations of, So	plicable (NOT	6: Registere	d Agent		ured when r		· 		M/E	D DIRECT	ORS IN 12
SIGNATURE	Signature, typed or printed name of registeric OFFICERS	t agent and title if app	plicable. (NOT	6: Registere 13.	d Agent		ured when r	einstating)	· 		M/E		
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14. Thereby 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 attacomment within a didress, with all other like empowered.

SIGNATURE: