


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91909 015 ***158.75

DOCUMENT # P98000053344			
1. Entity Name RIOMA, CORP.			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 5951 NW 151 STREET		3. Mailing Address 5951 NW 151 ST	
Suite, Apt. #, etc. #208		Suite, Apt. #, etc. #208	
City & State MIAMI LAKES, FL		City & State MIAMI LAKES, FL	
Zip 33014	Country	Zip 33014	Country
4. FEI Number 65-0869370		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name PENALVER MARIO			
Street Address (P.O. Box Number is Not Acceptable)			
5951 NW 151 ST #208			
City MIAMI LAKES		FL	Zip Code 33014
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____			
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PENALVER, MARIO PD 5951 NW 151 ST SUITE #208 MIAMI LAKES, FL. 33014	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Mario Penalver</i> MARIO PENALVER		4/29/03	305-362-3033
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

CR2E034B (12/02)