

2006 FOR PROFIT CORPORATION

Apr 05, 2006 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P99000018295 04-05-2006 90156 004 ***158.75 1. Entity Name RIVERA CONSTRUCTION, INC. 00003273 Principal Place of Business Mailing Address **6217 CARTWRITE ROAD 6217 CARTWRITE ROAD** BROOKSVILLE, FL 34609 BROOKSVILLE, FL 34609 No Chg-P CR2E034 (11/05) 03232006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3570238 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RIVERA, VANESSA DO NOT WRITE **6217 CARTWRITE ROAD** BROOKSVILLE, FL 34609 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE; Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE RIVERA, RANDY J NAME 6217 CARTWRITE ROAD STREET ADDRESS BROOKSVILLE, FL 3460 34609 CITY-ST-ZIP ST TITLE RIVERA, VANESSA NAME 6217 CARTWRITE ROAD STREET ADORESS BROOKSVILLE, FL 3460 34609 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 attachn

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

FILED