

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 29, 2001 8:00 am**  
**Secretary of State**

08-29-2001 90013 038 \*\*\*550.00

**DOCUMENT # P99000042595**

1. Entity Name  
**RIVER INVESTMENT NETWORK-2000, INC.**

Principal Place of Business

**870 N.W. 11TH ST.  
 MIAMI FL 33136**

Mailing Address

**870 N.W. 11TH ST.  
 MIAMI FL 33136**

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

**52-2216424**  
**05-00000000**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**IVANOV, KRASSIMIR  
 870 N.W. 11TH ST.  
 MIAMI FL 33136**

7. Name and Address of New Registered Agent

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 fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**8/15/01**

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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

TITLE **P** ☐ Delete  
 NAME **KRASSIMAR, IVANOV**  
 STREET ADDRESS **870 NW 11TH STREET**  
 CITY-ST-ZIP **MIAMI FL 33136**

TITLE **C** ☒ Delete  
 NAME **REID, JANET**  
 STREET ADDRESS **1000 NW 10TH AVE**  
 CITY-ST-ZIP **MIAMI FL 33136**

TITLE **D** ☒ Delete  
 NAME **PLAMEN, ZONEV**  
 STREET ADDRESS **970 NW 10TH AVE**  
 CITY-ST-ZIP **MIAMI FL 33136**

TITLE **D** ☒ Delete  
 NAME **ZHELYAZKOVA, MARY**  
 STREET ADDRESS **723 NW 9TH AVE**  
 CITY-ST-ZIP **MIAMI FL 33136**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **KRASSIMIR, IVANOV, V-P, S.T.** ☐ Change ☒ Addition  
 NAME **Director**  
 STREET ADDRESS **870 N.W. 11th Street**  
 CITY-ST-ZIP **MIAMI, FL. 33136**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:

**KRASSIMIR IVANOV**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)