2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# U00045

FILED May 01, 2002 8:00 AM Secretary of State

Entity Name: RIVER ONE INTERNATIONAL MARKETING, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
7406 N. U VERO BE	S HWY 1 ACH, FL 32967	US	4425 US HWY 1 VERO BEACH, FL 32	967 US	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX VERO BEA	5010 ACH, FL 32961	US			
FEI Number	: 65-0311953	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Cur	rrent Registered Agent:	Name and Address of	of New Registered Agent:	
3705 - 201 VERO BE	V. CODY SR ITH STREET ACH, FL 32960	US			
		omits this statement for the i	nurnose of changing its registere	d office or registered agent, or both	
	e of Florida.	omits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
	e of Florida.	omits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
in the Stat	e of Florida. RE:	omits this statement for the signature of Registered Ag		d office or registered agent, or both, Date	
in the State	e of Florida. RE:	Signature of Registered Ag	ent		
in the State	e of Florida. RE: Electronic	Signature of Registered Ag ORS: elete SR 32962	ent	Date	
in the State SIGNATUI OFFICER Title: Name: Address: City-St-Zip:	e of Florida. RE: Electronic S AND DIRECTO PD () De ESTES, W. CODY 4425 N US HWY 1 VERO BEACH, FL	Signature of Registered Ag ORS: elete SR 32962 elete I R	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. CODY ESTES, SR MR. 05/01/2002