

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

RECEIVED AND FILED
 1997 DEC 19 11 12:23

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **V33610**

1. Corporation Name
RIVERO INVESTMENT GROUP, INC.

Principal Place of Business 7335 N. W 31 STREET P.O. BOX 52-7404 MIAMI FL 33122-1240 US	Mailing Address P. O. BOX 52-7404 P.O. BOX 52-7404 MIAMI FL 33152-7404 US
---	---



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business In Florida 05/04/1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 05-0328145	
City & State		City & State		Applied For	
Zip		Zip		Not Applicable	
Country		Country		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
OT	RIVERO, JORGE H., SR.	2555 COLLINS AVE., STE. 2406	MIAMI FL
SVD	RIVERO, JOSEFINA	2555 COLLINS AVE , STE. 2406	MIAMI FL
VD	RIVERO, JORGE H., JR.	2555 COLLINS AVE. STE. 2406	MIAMI FL
PD	RIVERO, JUAN CARLOS	433 W 45TH PL.	HIALEAH FL

REINSTATEMENT *9/28/97*
12/19/97

8. Name and Address of Current Registered Agent RIVERO, JUAN C 433 W. 45TH PLACE HIALEAH FL 33012		9. Name and Address of New Registered Agent Name 400002380094-5 -12/23/97--01025--004 Street Address (P.O. Box Number is Not Accepted) 758.75 ***758.75 Suite, Apt. #, Etc. City State FL Zip Code	
--	--	---	--

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.
 Signature of Registered Agent *[Signature]* REGISTERED AGENT MUST SIGN Date **11-21-97**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on Intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Signature]* **JUAN C. RIVERO** 10-31-97 305-477-1600
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/97)