FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V38824

(1)

RIVER PRODUCTS, INC.

FILED
Jan 17 1997 8:00am
Secretary of State



Principal Place 2100 CORAL V SUITE 302 MIAMI FL 3314	VAY	2100 Suite Miam	Mailing Address 2100 CORAL WAY SUITE 302 MIAMI FL 33145-2678									
US		US 						3. Date Incorporated or Qualifie 05/27/1992		Date of Last F 1/29/1996	leport	
2. Principal P	flace of Business	2a. № 26	2a, Mailing Address 26				OF 0644460			oplied For ot Applicable		
Suite, Apt.	#, etc.	27 S	uite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired	
City & Stat	0	28	ity & State					Election Campaign Financing Trust Fund Contribution		•	May Be to Fees	
Zip	Country		ıb	C	ountry	/		B. This corporation has liability f	or intengil	ole tax under s	. 199.032,	
24	25	29		30				Florida Statutes	Yes	☐ No		
	9. Name and Address of Curr	ent Register	ed Agent					10. Name and Address of New	Registere	d Agent		
LIBE	RATORE, MICHAEL J				81	۱	Name					
801	BRICKELL AVENUE TE 929				82	5	Street Addre	ess (P.O. Box Number is Not Accep	lable)			
	MI FL 33131				83			· · · · · · · · · · · · · · · · · · ·				
					84	(City		F	85 Zip	Code	
agent. La SIGNATURE	in familiar with, and accept the obt	igations of, S	Section 607.0505, F	TE Regist	tatutes	S.		on's board of directors. I hereby ac ad when reastating) ADDITIONS/CHANGES TO OF	DATE			
12.	GM	AND DIRECT	DELETE		a. TITLE		——	ADDITIONS/CHANGES TO OF	FICENS A	Change	Addition	
	BERNARDES, EDGAR D		L] better		NAME					ட் வகரி	Nutrition	
NAME	80 N PROSPECT DRIVE											
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14. Ido 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 annual report or supplemental annual 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 12 or Block 13 if changed on on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eloard Bern

-1/7/96

(305) 8586232

0203209