

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2000 8:00 am
Secretary of State

03-30-2000 90033 017 ****61.25

DOCUMENT # 710349

1. Entity Name

THE RIVIERA CONDOMINIUM APARTMENTS, INC.

Principal Place of Business

1150 N.E. 191ST STREET
 BUILDING C
 NORTH MIAMI BEACH FL 33179-1033

Mailing Address

1150 N.E. 191ST STREET
 BUILDING C
 NORTH MIAMI BEACH FL 33179-4090

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1146046

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOOD, JAMES D DR
 1100 N.E. 191 ST.
 #E25
 NO. MIAMI BEACH FL 33179

7. Name and Address of New Registered Agent

Name **VERONICA ADAMS**
 Street Address (P.O. Box Number is Not Acceptable) **1150 NE 191 ST**
2nd FLOOR, CAPRI ROOM
 City **North Miami Beach FL** Zip Code **33179**

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 Veronica Adams, Secretary DATE 3/24/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	WASSERMAN, ARNOLD	
STREET ADDRESS	1160 NE 191TH ST #B21	
CITY-ST-ZIP	N MIAMI BEACH FL 33179	
TITLE	VD	<input type="checkbox"/> Delete
NAME	CORTEZ, LOUIS	
STREET ADDRESS	1000 NE 191TH ST #F15	
CITY-ST-ZIP	N MIAMI BEACH FL 33179	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	WOOD, DR. JAMES D.	
STREET ADDRESS	1100 NE 191 STREET E36	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33179	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ROKER, SANDRA	
STREET ADDRESS	1000 NE 191 ST #F32	
CITY-ST-ZIP	N MIAMI BEACH FL 33179	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	SCLAFANI, MICHAEL	
STREET ADDRESS	1170 NE 191 ST #A34	
CITY-ST-ZIP	N MIAMI BEACH FL 33179	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	GOLDEN, BENJAMIN	
STREET ADDRESS	1000 NE 191 ST #F11	
CITY-ST-ZIP	N MIAMI BEACH FL 33179	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOUIS CORTEZ	
STREET ADDRESS	1000 N.E. 191 St. #F15	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NANCY HANDLER	
STREET ADDRESS	1000 N.E. 191 St. #F34	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANDRA ROKER	
STREET ADDRESS	1000 N.E. 191 St. #F32	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VERONICA ADAMS	
STREET ADDRESS	1100 N.E. 191 St. #E45	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE	MD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MENACHEM FLOR	
STREET ADDRESS	1160 N.E. 191 St. #B36	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE	DD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TEDDY L'HOUTELLIER	
STREET ADDRESS	1150 N.E. 191 St. #C38	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Veronica Adams, Secretary DATE 3/24/00 DAYTIME PHONE # 305/949-3284
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/99)

710 344

927684



Riviera

ON THE LAKE

Condominium Apartments/1150 N.E. 191st Street, North Miami Beach, FL 33179/(305) 949-3284

MARCH 23, 2000

THIS IS OUR SEVENTH MEMBER OF THE BOARD OF DIRECTORS:

TITLE:	DD	ADDITION
NAME:	ANNOUSE ELIZEE	
ADDRESS:	1100 N.E. 191 St. #E43	
CITY-ST-ZIP:	NORTH MIAMI BEACH, FL 33179	

BOARD OF DIRECTORS