

AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1998

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



FILED

98 OCT 16 PM 4:22

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # 714481 (9)

1. Corporation Name
RIO NUEVO DOCKS, INC.

Principal Place of Business Mailing Address

2624 NE 32ST
 222
 FT LAUDERDALE FL 33306
 US

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 222
 FT LAUDERDALE FL 33306
 US

3. Date Incorporated or Qualified
04/22/1968

4. FEI Number
NOT APPLICABLE

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address

21 **2928 OAK PARK CIRCLE** 26 **2928 OAK PARK CIRCLE**

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 27

City & State City & State

23 **DAVIE, FL** 28 **DAVIE, FL**

Zip Country Zip Country

24 **33328** 25 29 **33328** 30

9. Name and Address of Current Registered Agent

PELTON, ARTHUR
2624 NE 32 ST SUITE 222
POMPANO BEACH FL 33060

10. Name and Address of New Registered Agent

81 Name **LUIS REY**

82 Street Address (P.O. Box Number is Not Acceptable)
2928 OAK PARK CIRCLE

83

84 City **DAVIE** FL 85 Zip Code **33328**

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE **LUIS REY** DATE **9-14-98**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE V DELETE

NAME **BROWNING, LAWRENCE**

STREET ADDRESS **4050 S.W. 1ST STREET**

CITY-ST-ZIP **PLANTATION FL**

TITLE TS DELETE

NAME **PELTON, ARTHUR**

STREET ADDRESS **310 SE 15TH AVE**

CITY-ST-ZIP **POMPANO BEACH FL**

TITLE D DELETE

NAME **DUFOUR, GARY**

STREET ADDRESS **707 S LAKE CLAY DR**

CITY-ST-ZIP **LAKE PLACID FL**

TITLE P DELETE

NAME **SURGE, ALEX**

STREET ADDRESS **809 SW 9 TERRACE**

CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE D DELETE

NAME **DANKO, FRANK**

STREET ADDRESS **1821 ADAMS ST.**

CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE D DELETE

NAME **CARDENAS, ROBERT**

STREET ADDRESS **5055 N A1A #606**

CITY-ST-ZIP **FT PIERCE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE **DIRECTOR** Change Addition

2.2 NAME **PELTON, ARTHUR**

2.3 STREET ADDRESS **2221 NW 34 TERRACE**

2.4 CITY-ST-ZIP **COCONUT CREEK, FL 33066**

3.1 TITLE **TREASURER-SECRETARY** Change Addition

3.2 NAME **REY, Luis Rey**

3.3 STREET ADDRESS **2928 OAK PARK CIRCLE**

3.4 CITY-ST-ZIP **DAVIE, FL 33328**

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS **500002668165--5**

4.4 CITY-ST-ZIP **-10/20/98--01053--007**

5.1 TITLE *******61.25** Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **ARTHUR PELTON** DATE **9-14-98**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARTHUR PELTON, SECRETY-TREAS (LEAVING)

Date Daytime Phone #

0006146

CR2E037 (5/98)