

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2001 08:00 AM
Secretary of State

DOCUMENT # A96000001530

1. Entity Name
RIVIERA CLUB GENERAL, LTD.

Principal Place of Business 1600 SOUTH OCEAN BLVD. POMPANO BEACH FL 33062	Mailing Address 1600 SOUTH OCEAN BLVD. POMPANO BEACH FL 33062
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2. Principal Place of Business ONE SOUTH OCEAN BLVD Suite, Apt. #, etc. SUITE 204 City & State BOCA RATON FL	3. Mailing Address ONE SOUTH OCEAN BLVD Suite, Apt. #, etc. SUITE 204 City & State BOCA RATON FL		
Zip 33432	Country	Zip 33432	Country

4. FEI Number
65-0704255

Applied For	Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

EISINGER DENIS
 PHILLIPS, EISINGER, KOSS & ROSENFELDT
 4000 HOLLYWOOD BLVD., SUITE 265 SOUTH
 HOLLYWOOD FL 33021 US

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ DATE **04/24/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **27,700.00**

10. Amount of Capital Contributions in FLORIDA to date. **27,700.00**

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	
NAME	RIVIERA CLUB, INC.
STREET ADDRESS	1600 SOUTH OCEAN BLVD.
CITY-ST-ZIP	POMPANO BEACH FL 33062
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: J F Roy Pres 04/24/2001 Date
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

CR2E003 (11/00)