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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

N50490

(4)

Corporation	Name							1					
RIVIERA	BY THE	BAY HOMEO	WNERS A	SSOCIATIO	ON, INC	· •							
Principal Place	of Business		M	ailing Address			······································						
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17 SW 105TH PLACE 47 SW 105TH PLACE MIAMI FL 33174 MIAMI FL 33174-1626							1						
								3. Da	ite Incorporated or Qua	lified	3a. Date	of Last R	eport
									08/20/1992		04	4/18/19	96
2. Principal Pla	ace of Busin	ess	├ ─	Mailing Addre	ss			4. FE	Number 65-0421838				plied For
Suite, Apt. #	t atc		26	Suite, Apt. #, e	etc		.,		00'042 1000			\$8.75	t Applicabl
2 3dite, Apr. 4	r, 61G.		27	Suite, Apt. #, t	oto.			5. Ce	ertificate of Status Desir	ed [Fee Re	
City & State		· · · · · · · · · · · · · · · · · · ·		City & State	····			6. Ele	ection Campaign Financ			\$5.00	
:3			28			<u> </u>	-		ust Fund Contribution	······································	<u> </u>	Added	
Ζφ 4]	}	Country		Zip	31	Country			ls corporation has liabil xida Statutes	lity for inti			. 199.032,
41		and Address of C	29 Surrent Regis	tered Agent	[31	1			ime and Address of N				
						81	Name						
ANGEL M	IENES					82	Street Add	dress (P.O.	Box Number is Not Ac	ceptable)		<u>, , .</u>
47 SW 10											, 		
MIAMI FL	33126					83							
						84	City				FL	85 Zip	Code
												hanaina ii	s registered
11. Pursuant to	a the provis	ions of Sections 61	7.0502 and 6	17.1508. Florid	a Statutes	the above	-named cor	rporation si	ubmits this statement to	or the pur	DOSO DI C		
11. Pursuant to office or re	o the provis egistered ag n tamiliar wi	ions of Sections 61 ent, or both, in the	7.0502 and 6 State of Floridations of	17.1508, Florida da. Such chang	a Statutes, le was aut	the above	named cor the corpora	rporation si ation's boa	ubmits this statement for rd of directors. I hereby	or the pur accept t	pose of c the appoi	ntment as	registered
	o the provis egistered ag n lamiliar wi	ions of Sections 61 ent, or both, in the th, and accept the	7.0502 and 6 State of Florid obligations of	i17.1508, Florid da. Such chang f, Section 617.0	a Statutes, le was aut 0503, Florid	, the above thorized by da Statutes	named cor the corpora	rporation si ation's boa	ubmits this statement for rd of directors. I hereby	or the pur accept t	pose of c the appoi	ntment as	registered
SIGNATURE		or printed name of register	red agent and title	if applicable			-named cor the corpora it signature requ	uired when rein	stating)		DAYE		
SIGNATURE - 5	Signature, typed	or printed name of register		if applicable	(NOTE F	Registered Ager		uired when rein			DAYE RS AND [DIRECTOR	IS IN 12
SIGNATURE _ 5	Signature, typed	or printed name of register OFFICER	red agent and title	if applicable	(NOTE F	Registered Ager		uired when rein	stating)		DAYE RS AND [IS IN 12
SIGNATURE ; 12. TITLE NAME	Signature, typed PD MENES,	or printed name of register OFFICER	red agent and title	if applicable	(NOTE F	Registered Age 13. 1.1 TITLE 1.2 NAME	n signature requ	uired when rein	stating)		DAYE RS AND [DIRECTOR	IS IN 12
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