

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010983

**Entity Name:** RIVIERA DENTAL STUDY CLUB INC.

**Current Principal Place of Business:**

2828 CORAL WAY  
STE 300  
MIAMI, FL 33145

**Current Mailing Address:**

2828 CORAL WAY  
STE 300  
MIAMI, FL 33145

**FEI Number:** 46-1429766

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FAUSTO ALVAREZ, PA  
6000 BIRD RD.  
MIAMI, FL 33155 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BORGES, OSBEL DR.  
Address        6200 SUNSET DRIVE  
                 SUITE 402  
City-State-Zip: MIAMI FL 33143

Title            VP, SECRETARY  
Name            LOPEZ, JENNIFER DR.  
Address        13262 NW 1ST TERRACE  
City-State-Zip: MIAMI FL 33182

Title            TREASURER  
Name            GUREVICH, JOSE DR.  
Address        6000 BIRD ROAD  
City-State-Zip: MIAMI FL 33155

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** JOSE GUREVICH

**TREASURER**

**07/03/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date