FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT #Corporation Name 661283

(2)

RIVE GAUCHE SOUTHEASTERN, INC.

Principal Place of Business	Mailing Address	
11096 BISCAYNE BLVD SUITE #402 NORTH MIAMI FL 33161	11098 BISCAYNE BLVD SUITE #402 NORTH MIAMI FL 33161	DO NOT V
		3. Date Incorporated or Qual 03/18/1980
2. Principal Place of Business	2a. Mailing Address 26	4. FEI Number 59-1983777
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desire
City & State	City & State	6. Election Campaign Financi Trust Fund Contribution
Zip Country	Zip Country	8. This corporation owes or h

FILED Apr 21 1998 8:00am Secretary of State



VRITE IN THIS SPACE ified Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be ing П Added to Fees as paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BEDZOW, MICHAEL, ESQ. 20803 BISCAYNE BLVD Street Address (P.O. Box Number is Not Acceptable) SUITE 200 83 **AVENTURA FL 33180** 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE ☐ Change 🔀 Addition BEDZOW, CHARLES NAME 12 NAME 11098 BISCAYNE BLVD #402 STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI FL CITY-ST-ZIP 3.3/61 1.4 CITY-ST-ZIP ■ DELETE TITLE 2.1 TITLE Addition NAME BEDZOW, SARA 2.2 NAME 11098 BISCAYNE BLVD #402 STREET ADORESS 2.3 STREET ADDRESS NORTH MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Addition SHAPIRO, HOWARD NAME 3.2 NAME 11098 BISCAYNE BLVD #402 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP NORTH MIAMI FL 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Addition SHAPIRO, HOWARD NAME 4. 2 NAME 11000 DISCAYNE BLVD #402-STREET ADDRESS 4.3 STREET ADDRESS NORTH MIAMI FL-CITY-ST-ZIP 4.4 DITY-ST-ZIP DELETE TITLE 5.1 THLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CiTY-ST-ZIP TITLE DELETE 6.1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

CITY-ST-ZIP 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)(1). 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 If changed, or on any little imment with an address.

SIGNATURE: