

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

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DOCUMENT # 687831

(8)

1. Corporation Name

RIVIERA RITZ, INC.

Principal Place of Business

2441 BEACH COURT
C/O DONALD RITZ
RIVIERA BEACH FL 33404

Mailing Address

2441 BEACH COURT
C/O DONALD RITZ
RIVIERA BEACH FL 33404



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RITZ, DONALD
2441 BEACH COURT
RIVIERA BEACH FL 33404

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 official signer

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DP

☐ DELETE

NAME
RITZ, DONALD
STREET ADDRESS
14110 LEEWARD WAY
CITY-ST-ZIP
JUNO BCH. FL

TITLE

VST

☐ DELETE

NAME
RITZ, MARILYN A
STREET ADDRESS
14110 LEEWARD WAY
CITY-ST-ZIP
JUNO BCH. FL

TITLE

VP

☐ DELETE

NAME
RITZ, DONALD JR.
STREET ADDRESS
4655 ARTHUR STREET
CITY-ST-ZIP
PALM BEACH GARDENS FL

TITLE

☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE

☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE

☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

2. TITLE

2. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

☐ Change ☐ Addition

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Handwritten: 6-21-96

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Handwritten: See files

Handwritten: 6-1-96

Handwritten: 407 7753959

CR2E034 (12/95)