

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 710349

1. Entity Name

THE RIVIERA CONDOMINIUM APARTMENTS, INC.

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90132 010 ****61.25

Principal Place of Business

Mailing Address

2 N.E. 191ST STREET
BUILDING C
NORTH MIAMI BEACH FL 33179-1033

1150 N.E. 191ST STREET
BUILDING C
NORTH MIAMI BEACH FL 33179-1033

00001001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1146046

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROKER, SANDRA
1150 NE 191 ST
2ND FLOOR CAPRI ROOM
NO. MIAMI BEACH FL 33179

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: **Martin Gorin, President**

4/8/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: VD ☒ Delete
NAME: HANDLER, NANCY
STREET ADDRESS: 1000 NE 191 ST #F34
CITY-ST-ZIP: N MIAMI BEACH FL 33179

TITLE: VD ☐ Change ☒ Addition
NAME: Nelly Yefet
STREET ADDRESS: 1170 NE 191 ST. #A-43
CITY-ST-ZIP: N. Miami Beach, FL 33179

TITLE: TD ☒ Delete
NAME: SEYMOUR, SORIN
STREET ADDRESS: 1170 NE 191 ST #A32
CITY-ST-ZIP: N MIAMI BEACH FL 33179

TITLE: TD ☒ Change ☒ Addition
NAME: Michael Scalfani
STREET ADDRESS: 1170 NE 191 ST. #A-34
CITY-ST-ZIP: N. Miami Beach, FL 33179

TITLE: TD ☐ Delete
NAME: ROKER, SANDRA
STREET ADDRESS: 1000 N.E. 191 ST #F34
CITY-ST-ZIP: NORTH MIAMI BEACH FL 33179

TITLE: SD ☒ Change ☐ Addition
NAME: SANDRA ROKER
STREET ADDRESS: 1000 NE 191 ST. #F-32
CITY-ST-ZIP: N Miami Beach, FL 33179

TITLE: PD ☒ Delete
NAME: ROKER, SANDRA
STREET ADDRESS: 1000 NE 191 ST #F32
CITY-ST-ZIP: N MIAMI BEACH FL 33179

TITLE: PD ☐ Change ☒ Addition
NAME: MARTIN GORIN
STREET ADDRESS: 1140 NE 191 ST. #D-32
CITY-ST-ZIP: N. Miami Beach, FL 33179

TITLE: MD ☒ Delete
NAME: PATRICK, MICHAEL
STREET ADDRESS: 1140 NE 191 ST #D16
CITY-ST-ZIP: N MIAMI BEACH FL 33179

TITLE: MD ☐ Change ☒ Addition
NAME: HECTOR LECOUNA
STREET ADDRESS: 1160 NE 191 ST. #B-23
CITY-ST-ZIP: N. Miami Beach, FL 33179

TITLE: DD ☒ Delete
NAME: GORIN, MARTIN
STREET ADDRESS: 1140 NE 191 ST #D32
CITY-ST-ZIP: N MIAMI BEACH FL 33179

TITLE: DD ☒ Change ☒ Addition
NAME: Betty Golden
STREET ADDRESS: 1000 NE 191 ST. #F-11
CITY-ST-ZIP: N. Miami Beach, FL 33179

12. 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 or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/02 305-949-3284
Date Daytime Phone #

CR2E037 (9/01)