


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

APPROVE
AND
FILE
01-30-2007 90015 001 *****61.25
01-30-2007 90015 002 *****8.75

DOCUMENT # 748839			
1. Entity Name RIVIERA VILLAS CONDOMINIUM ASSOCIATION, INC.		07 FEB 16 PM 4:42 SECRETARY OF STATE TALLAHASSEE, FLORIDA <i>JSC</i>	
Principal Place of Business 1220-71ST ST. BOX 1 MIAMI BEACH FL 33141		Mailing Address 1220 - 71ST STREET, BOX 1 MIAMI BEACH FL 33141	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FEI Number 59-0552071		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		1st MOORE CR2E037 (10/06)	
6. Name and Address of Current Registered Agent FAJARDO, LUIS R 1220-71ST STREET #46 MIAMI BEACH FL 33141		7. Name and Address of New Registered Agent Name Diana - Beatriz Katz Biro Street Address (P.O. Box Number is Not Acceptable) 1220 - 71st Street Apt. 41 City Miami Beach FL Zip Code 33141	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Diana Beatriz Katz Biro</i>		DATE 1/24-2007	
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when re-registering)		DATE	
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TORRES, NANCY 1220 71ST ST #12 MIAMI BEACH FL 33141	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete D DELGADO, ESTELA 1220-71ST #33 MIAMI BEACH FL 33141	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Vice President & DIRECTOR
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Diana - Beatriz Katz Biro
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1220 - 71st Street Apt. 41 Miami Beach - Florida 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Treasurer Carlos Bolognez 1220 - 71st Street - Apt. 31 Miami Beach Florida 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Member SECRETARY David Leroi 1220 - 71st Street Apt. 14 Miami Beach Florida 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>Diana Beatriz Katz Biro</i>		DATE 1/24-2007	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
		Daytime Phone # 305 300 1305	