		DUGUEOG	DEDODE	/IIDD
2001	UNIFORM	<b>BUSINESS</b>	KEPOKI	(UBK)

DOCUMENT # A0000001525  1. Entity Name					سد ن						Ø Af			
•		D BEACH CLUB,	LTD.				F1	LED 23 PM 12:	39					"
Principal Place of Business  2828 CORAL WAY, PENTHOUSE SUITE  MIAMI FL 33145  Mailing Address  2828 CORAL WAY, PENTHOU  MIAMI FL 33145			House Su	ITE SE TAL		RY OF STAT								
	1						. •							
2. Principal P	lace of Busir	ness	3. M	ailing Address	•	-		7	<b>                                 </b>	1 K9(1) UU)			III) I <b>U</b> E)	
Suite, Apt.	#, etc.	1777 .	Su	ite, Apt. #, etc.				1	DO NOT WRIT	E IN THI	S SPAC	E		
City & State	e		Ci	City & State		4. FEI Number	1061.38	-9	•	Applied Not Ap	d For plicable			
Zip		Country	Zi	<del>)</del>	Coun	try			f Status Desired	×		<b>75</b> Addition Required	al .	
***	6. Name	and Address of C	urrent Registe	red Agent	<del></del> -			7. Name and A	ddress of New R	egistere	d Agen	t		1
· · · <del></del>	J 1911/14					Name	_			,				
ROCHA, ROBERTO S					Street A	Address (	P.O. Box Number	is Not Acceptable	)					
	· ·	ENTROUSE SUIT									-	-		
MIAMI FL	33145					- 01					. 1	Zip Code		1
						City				F	L   '	ZID COUR		]
8. The above	named entit	y submits this stater	ment for the pu	rpose of changing it	s register	ed office o	r register	red agent, or both	, in the State of Flo	rida.				
SIGNATURE .	Signature, typed	or printed name of register	ed agent and title if a	pplicable. (NO	TE: Registere	d Agent signs	ture required	d when reinstating)		DATE	<u> </u>			
9. Capital Co as Shown	on record.	\$6,000,000	,	<ol> <li>Armount of Cap in FLORIDA to</li> </ol>	date.					SE SIDE	FOR FE	DEPT. OF ST E INFORMA	TION	
	A	GENERAL PART	NER THAT IS	A BUSINESS E be changed on	NTITY N	UST BE	REGIS'	TERED AND AC	CTIVE WITH THI I to change a ge	S OFFI eneral p	CE. artner	•		
12.	NOTE	GENERAL PA	ARTNER INFOR	MATION	13.				ADDRESS CHA	ANGES C	NLY			1_
DOCUMENT #	L0000001	<del></del> -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		CTD	EET ADDRESS								00/
NAME STREET ADDRESS	TRG-RIVIERA DEVELOPMENT, LLC 2828 CORAL WAY, PENTHOUSE SUITE				'-ST-ZIP							<del></del>	R2E003 (11/00)	
DOCUMENT #	MIAMI FL	33145	<u></u>	·			<del>  -</del>	<u> </u>			·	<u></u>		12K
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_street_address . City-st-zip				<u></u>		r-ST-ZIP~—					<del></del> -			] -
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14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes														
SIGNAT	TURE:	SIGN	MA	fore		Via	Pas	dut 4/	12/01	/3	(20)	460,99	60	
		SIGNATURE AND T	TYPED OR PRINTED	NAME OF SIGNING GENE	PARTN	ER		7.7	Date	(	Daytim	e Phone #		1