2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Apr 17, 2008 08:00 A Secretary of State

	ay ., 2000	,
DOCUMENT # A070000 1. Entity Name RIVIERA AVENUE P, LLLP	000002	
Principal Place of Business	Mailing Address	
C/O HUNT & GROSS, P.A.	C/O HUNT & GROSS, P.A	
2200 N.W. CORPORATE BLVD., #401	2200 N.W. CORPORATE BLVD., #401	

BOCA RATON, FL 33431



DO NOT WRITE IN THIS SPACE

04102008 No Chg-LP CR2E003 (12/06)

4. FEI Number
20-4065964

Solutional Fee Required

Applied For Not Applied For

6. Name and Address of Current Registered Agent

HCRM CORP. 2200 N.W. CORPORATE BLVD., #401 BOCA RATON, FL 33431

BOCA RATON, FL 33431

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 The above named entity submits this statement for the purpose of changing its registered office or regis the obligations of registered agent 	stered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	DATE
FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGI	

12. GENERAL PARTNER INFORMATION L04000009901 DOCHMENT # NAME CHRIS O'CONNOR, LLC STREET ADDRESS 2200 N.W. CORPORATE BLVD., #401 City-ST-7IP BOCA RATON, FL 33431 DOCUMENT # ÈNGLISH, DENIS NAME STREET ADDRESS 2200 N.W. CORPORATE BLVD., #401 CITY-ST-ZIP BOCA RATON, FL 33431 DOCUMENT # NAME HURLEY, LIAM STREET ADDRESS 2200 N.W. CORPORATE BLVD., #401 CITY-ST-ZIP BOCA RATON, FL 33431 DOCUMENT # NAME STREET ADDRESS

U00000904896 05/01/08-80031-011 500.00

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 employered to execute this report as required by Chapter 620. Florida Statutes

SIGNATURE:

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS

GUS D COMMON CHR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CHEIS O'CONNOR

4/14/08 561-542-1142

Daytime Phone #