2003 LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR)**

| DOOLINAENIT U | A9300 | $\Delta \Delta \Delta \Delta$ | 10001 |
|---------------|---|-------------------------------|-----------|
| DOCUMENT # | 44.3LU | 11 H N | リシスト |
| DOCUMENT # | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | - | ///////// |

1. Entity Name

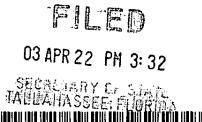
SCHICKEDANZ BROS - RIVIERA LTD.



Principal Place of Business
7711 N. MILITARY TRAIL. 3RD FLOOR PALM BEACH GARDENS FL 33410

Mailing Address 7711 N. MILITARY TRAIL, 3RD FLOOR PALM BEACH GARDENS FL 33410

| GOO WE THE | |
|------------|--|



| 2. Principal Place of Business 7741 N. Military Trail 7741 N. Military Trail | | | rail | - I CORNACI DELO MINOS INCIN ACUIL BONIL | | | | | | |
|---|--------------------------|---|---|--|---|--|--|----------------------------------|--|--|
| Suite, Apt. #, etc. Suite l | | | | | | DUE BY MAY 1, 2003 | | | | |
| City & State Palm Beach Gardens, FL City & State Palm Beach G | | City & State Palm Beach Gar | ırdens, FL | | 4. FEI Number | ber 65-0397107 | | Applied For Not Applicable | | |
| Zip 33410 | Country | ^{Zip} 33410 | Coun | us | 5. Certificate of | Status Desired | | 75 Additional Required | | |
| 6. Name | and Address of Current I | Registered Agent | | | 7. Name and Address of New Registered Agent | | | | | |
| SCHICKEDANZ, WALDEMAR 7711 N. MILITARY TRAIL, 3RD FLOOR PALM BEACH GARDENS FL 33410 | | | Street Address (P.O. Box Number is Not Acceptable) 7741 N. Military Trail, Suite 11 | | | | | | | |
| | | | City Palm Beach Gardens, FL Zip Code 33410 | | | | | | | |
| 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 - Signature, typed or printed name of registered agent and title if applicable. | | | | | DATE | | | | | |
| Capital Contributions as Shown on record. | \$10,000.00 | Amount of Capital Contributions in FLORIDA to date. | | | | 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION | | | | |
| A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. | | | | | | | | | | |
| 12. | GENERAL PARTNER | R INFORMATION 13. ADDRESS CHANGES ONLY | | | | | | | | |

K54111 DOCUMENT # STREET ADDRESS SCHICKEDANZ ENTERPRISES, INC. 7741 N. Military Trail, Suite 1 NAME 7711 N. MILITARY TRAIL, 3RD FLOOR STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS FL 33410 CITY-ST-ZIF Palm Beach Gardens, FL 33410 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS <u>800016657208</u> 04/22/03--01032--012 **15 NAME **158.75 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRÉSS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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

SIGNATURE:

コードイン

WALDEMAR K. SCHICKEDANZ

01/22/03

Date

561-845-8797

Daytime Phone #

CR2E003 (10/02)