## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

F94000004102 (9)

GLENRIVER, INC.

**FILED** Apr 08 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address							İ			1 1101100 1110 10111 01211 00111 02111		TIN MINET HAND EA	1110 1101 1001
1650 SE 17TH ST 2320 NE 9TH ST #300													
204					FT. LAUDERDALE FL 33304-650					50.407.455			
FT. LAUDERDALE FL 33316 US				US	U\$				-,	DO NOT WRITE IN THIS SPACE			
										<ol> <li>Date Incorporated or Qualified 08/08/1994</li> </ol>			
2.	Principal P	l Place of Business			2a. Mailing Address				7	4. FEI Number		A	oplied For
21					26				65-0507065		N(	ot Applicable	
Ц.	Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional
22	01.00			27				`	. Continuate of braids besiled		Fee Re	equired	
Ь,	City & State	·			City & State			(	6. Election Campaign Financing			May Be	
23					28					Trust Fund Contribution	<u> </u>	bebbA	to Fees
	Zip	Country			Zip Country			6	<ol><li>This corporation owes or has p</li></ol>				
24	<del></del>	25 29 30 30 9. Name and Address of Current Registered Agent					Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent						
	0.4			it Hegister	ed Agent		81	Name		O. Name and Address of New F	egistered	Agent	
SANTANGELO, CARL G					<b>l</b> '			Hairie	,				
3000 N. FEDERAL HWY.							82	Street	Address	ddress (P.O. Box Number is Not Acceptable)			
BLDG. 2, STE. 200													
FT. LAUDERDALE FL 33306													
							84	City			FI	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as re													ts registered
	office or re agent. I a	egistered agen m familiar with,	it, or both, in the State and accept the oblig	of Florida ations of, S	Such change was fection 607.0505, FI	authorize orida Stal	d by lutes	the cor	rporation's	s board of directors. I hereby acc	ept the ap	pointment as	registered
SI	GNATURE												
		Signature, typed or	printed name of registered age				d Age	nt signature	re required wh	nen reinstating)	DATE		1
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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 annual report or supplimental annual 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 received to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attaching with an address.