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 # F9700006730 (2)

RIVER BAY PLAZA CORP.

Principal Place of Business Mailing Address										
13760 NOEL ROAD STE 600 LB 70 13760 NOEL ROAD S			TE MGMT, INC LEGAL : 600 LB 70			50.05		85.45		
DALLAS TX 75240		DALLAS TX 75240				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qua 12/19/1997	ified		, <u>-</u>	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For	
21		26			75-2742290		No	ot Applicable		
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desire	od 🗀		Additional		
22		27			S. Commodio di Cidito Desiri		Fee Re	equired		
City & State		Cily & State			6. Election Campaign Finance		\$5.00	May Be		
23		28			Trust Fund Contribution		Added	to Fees		
Zip	Country	Ζip	$\overline{}$	ıntry		8. This corporation owes or f	•			
24	25	29	30	,		Personal Property Tax due			¶ No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of No	w Registered	Agent		
CO	RPORATION SERVICE COMPAN'	1		B1	Name					
120)1 HAYS STREET			82	Street Add	Iress (P.O. Box Number is Not Acc	eptable)			
TAL	LAHASSEE FL 32301-2525									
				83						
				84	City		FL	85 Zip	Code	
11 Pursuant t	a the provisions of Sections 607 0502	and 607 1508 Florida Statut	les the a	hove	named cor	poration submits this statement to		f changing if	s registered	
office or re agent. I ar	o the provisions of Sections 607.0502 ogistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, Fl	authorize orida Stat	d by tutes	the corpora	ation's board of directors. I hereby	eccept the ap	pointment as	registered	
SIGNATURE										
				legislered Agont signature requ			DATE	D DIDEOTOS		
12.	OFFICERS AND DIRECTORS DELETE		13.	13. 1.1 TITLE		ADDITIONS/CHANGES TO	OFFICERS AN	Change	Addition	
	TAYLOR, RON K							LI Ulaliye	LI Addition	
NAME	10000 11000 0010 011000 0110 00			1.2 NAME					Ī	
BALLAG TH TOAG		U LD /U	1.3 STREET ADDRESS							
CITY-ST-ZIP	DALLAS TX 75240	DELETE	1.4 C/TY - ST - Z/P 2.1 T/TLE		- ZIP		<u> </u>	Change	Addition	
TITLE	-		10					LI Change	LI MOSHBOR L	
NAME	SMITH, BARBARA	0.10.70	II =	2.2 NAME 2.3 STREET ADDRESS						
STREET ADDRESS	13760 NOEL ROAD SUITE 60	U LB /U			4					
CITY-ST-ZIP	DALLAS TX 75240	DELETE		HTY-SI	-ZIP			T 1 05	1.4.495-2	
TITLE		ר"ן הברבו ב	3.1 TI					Change	Addition	
NAME				3.2 NAME						
STREET ADDRESS	25			3.3 STREET ADDRESS						
CITY-ST-ZIP				3.4. CITY-ST-Z#P 4.1 TITLE					4,239.14	
TITLE		☐ DELETE						☐ Change	☐ Addition	
NAME			4.2 N		ŀ					
STREET ADDRESS					IDDRESS				ļ	
CITY-ST-ZIP	<u></u>	F1 25-		ITY-ST	- ZIP					
TITLE		☐ DELETE	5.1 Ti					☐ Change	Addition	
NAME			5.2 N/						i	
STREET ADDRESS			5.3 \$1	TREET A	ADDRESS				ļ	
CITY-ST-ZIP				TY-57	ZIP					
TITLE		☐ DELETE	6.1 70	TLE				Change	Addition	
NAME			6.2 N/	AME					ĺ	
STREET ADDRESS			6.3 ST	FREET A	DORESS				ļ	

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 annual report or supplemental 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 receiver or trustee empowered 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 a attachment with an address.

64 CITY-ST-ZIP

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(Com) 1/10 COM

FILED

May 11 1998 8:00am

Secretary of State