File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY **Katherine Harris** FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 APR 12 PM 3:51 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECHE MART OF STATE Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
of Limited Liability Company **DOCUMENT # 197000000461** 1a. Principal Place of Business Address RIVIERA AVIATION, L.C. 3050 NE 42ND ST 3050 NE 42ND ST FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 04/28/1997 FLSuite, Apt. #, etc. Suite, Apt. #, etc 4. FEI Number Applied For City & State City & State 62-1702043 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country S8 75 Additional Fee Required 04/20/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office JAY, DAVLD B 3050 NE 42ND ST Street Address (P.O. Box Number is Not Acceptable) 000002844860--FT LAUDERDALE FL 33308 ~<del>(M/20</del>/<del>29</del>--01003--023 Suite Apt. #, etc. \*\*\*\*\*188.75 \*\*\*\*\*188.7 Zip Code 9. Pursuant to the provisions of Sections 608 416 and 608 508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations DATE (Firigisland Argost Andrepting Approximent). (M. H.: Responsed Asjort signature responsible to a 10. Title Managing Members/Managers **Business Street Address** City. State and Zip Code JAY, DAVID B MGRM 3050 NE 42ND ST FT LAUDERDALE FL 436 N PEARL ST TAYLOR, W. RAY MGRM ROCKY MOUNT NO 11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. Hurther certify that the information accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the indicated on this annual report is true app limited liability company or the receiver tee empowered to execute this report as required by Chapter 608. Florida Statutes; and that my name appears in Block 10, or on an attachment with an address 9-99 252-442-213 SIGNATURE:

NA TERMINER CONTRACTOR

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