

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L99000007894**

1. Entity Name
THE RIVER HOUSE GROUP L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUL 21 PM 1:25

inf

Principal Place of Business
6451 MCKINLEY STREET
HOLLYWOOD FL 33024

Mailing Address
6451 MCKINLEY STREET
HOLLYWOOD FL 33024



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
6451 McKinley Street
Suite, Apt. #, etc.

City & State
Zip

City & State
Hollywood
Zip
33024

4. FEI Number
65-0966476

Applied For
Not Applicable

Country
Zip
33024

Country
Broward

5. Certificate of Status Desired ☒ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CASSARINO, JOHN S
6451 MCKINLEY STREET
HOLLYWOOD FL 33024

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE **MANAGER**
NAME **John S. Cassarino**
STREET ADDRESS **6451 McKinley St.**
CITY-ST-ZIP **Hollywood FL 33024**

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

7:17.00 954-986-9927
Date Daytime Phone #

CR2E083 (5/00)