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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M70679** **(9)**

1. Corporation Name

RIVIERA TAN SAFE, INC.

Principal Place of Business	Mailing Address
C/O MARCIA C BEATY 5410 WEST ATLANTIC BLVD. MARGATE FL 33063-5209	C/O MARCIA C. BEATY 5410 WEST ATLANTIC BLVD. MARGATE FL 33063-5209

2. Principal Place of Business 21 None	2a. Mailing Address 26 None
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City, & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified 02/29/1988	3a. Date of Last Report 04/14/1995
4. FEI Number 65-0033554	☐ Applied For ☑ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

BEATY, MARCIA C.
5410 WEST ATLANTIC BLVD.
MARGATE FL

10. Name and Address of New Registered Agent

81 Name: Guy Marchessault

82 Street Address (P.O. Box Number is Not Acceptable): 5410 W. ATLANTIC BLVD.

83

84 City: MARGATE FL 85 Zip Code: 33063

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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] Secretary 1/21/96
(Typed or printed name of Person Signing) (Title) (Registered Agent Signature required when filing) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEATY, MARCIA C. 5410 W. ATLANTIC BLVD. MARGATE FL ☑ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PRESIDENT BONNIE HANTSUFF 5410 W ATLANTIC BLVD. MARGATE FL ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEATY, CHARLES L. 5410 W. ATLANTIC BLVD. MARGATE FL ☑ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	SECRETARY GUY MARCHESSAULT 5410 W ATLANTIC BLVD. MARGATE FL ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LLOYD, W. SCOT 5410 W. ATLANTIC BLVD. MARGATE FL ☑ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	SECRETARY 71661 -02/20/96--01025--012 ***200.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition 52 2.20

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 an attachment with an address.

SIGNATURE: [signature] Secretary 1/21/96 954-942-0308
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

CR2E034 (12/95)