2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M90173

Entity Name: RIVIERA PLAZA OF HOLLY HILL, INCORPORATED

FILED Jan 06, 2009 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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1518 STATE AVENUE "A"

HOLLY HILL, FL 32117

1518 STATE AVENUE
SUITE A

HOLLY HILL, FL 32117

Current Mailing Address: New Mailing Address:

1518 STATE AVENUE "A"

A SUITE A

HOLLY HILL, FL 32117 US

1518 STATE AVENUE
SUITE A
HOLLY HILL, FL 32117

FEI Number: 59-3120753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARKOVICS, HEIGA J 1518 STATE AVENUE UNIT A HOLLY HILL, FL 32117 US

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:

City-St-Zip:

Electronic Signature of Registered Agent Date

City-St-Zip:

HOLLY HILL, FL 32117

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

HOLLY HILL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: FRANCESCHI, MAURO, Name: FRANCESCHI, MAURO Address: 1518 STATE AVENUE, SUITE A

City-St-Zip: HOLLY HILL, FL City-St-Zip: HOLLY HILL, FL 32117

Title: VTD Title: VTD (X) Change () Addition () Delete Name: FRANCESCHI, JUAN GUI, DO Name: FRANCESCHI, JUAN GUIDO 1518 STATE AVENUE, SUITE A 1518 STATE AVENUE, SUITE A Address: Address: HOLLY HILL, FL 32117 City-St-Zip: HOLLY HILL. FL City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition Name: FRANCESCHI, SANTE Name: FRANCESCHI, SANTE

Address: 1518 STATE AVENUE, SUITE A Address: 1518 STATE AVENUE, SUITE A City-St-Zip: HOLLY HILL, FL 32117

Title: S () Delete Title: S (X) Change () Addition

Name: MARKOVICS, HELGA,
Address: 1518 STATE AVENUE, SUITE A

Name: MARKOVICS, HELGA
Address: 1518 STATE AVENUE, SUITE A

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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

SIGNATURE: HELGA MARKOVICS S 01/06/2009

above, or on an attachment with an address, with all other like empowered.