FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



L'LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000013079 (6)

RIVERBANK ACCEPTANCE, INC.

FILED Mar 14 1997 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | | | * * * * |
|---|------------------|---------------------------|-------------------------------------|------------------------------|-------------|---|--------------------------------|----------------|
| | ND PARK BLVD | | 800 W OAKLAND PARK BLVD | | | | | |
| #100 | DALE EL 00014 | | #100 | | | | | |
| FORT LAUDERDALE FL 33311 US | | US US | FORT LAUDERDALE FL 33311-1733 US | | | 3. Date Incorporated or Qualified 02/15/1994 | 3a. Date of Last 05/01/1996 | |
| 2. Principal P | lace of Business | 2a. Mailing A | idress | | | 4. FEI Number | <u> </u> | Applied For |
| 21 | | 26 | | | | 65-0467453 | | Not Applicable |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired \$8.75 Additional | | |
| 22 | | 27 | | | | 5. Certificate of Status Desired | Fee | Required |
| City & State | | City & Sta | City & State | | | 6. Election Campaign Financing \$5.00 May Be | | |
| | | 28 | В | | | Trust Fund Contribution Added to Fees | | |
| Zip | Country Zip | | Country | | | 8. This corporation has liability for intangible tax under s 199.032, | | |
| 24 | 25 29 30 | | | Florida Statutes Yes No | | | | |
| | | of Current Registered Age | nt | | ···· | 10. Name and Address of New Reg | istered Agent | |
| | Sabi, steve | | | 81 | Name | | | |
| | 74 NW 11 CT | | | | Street Ac | trect Address (P.O. Box Number is Not Acceptable) | | |
| PLA | NTATION FL 33322 | | | | D. (D. () | | | |
| | | | | 83 | | | | |
| | | | | 84 | City | | 85 Zi | o Code |
| | | | | | · · | | FL 1 | |
| 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, typed or painted mone of regulated agent and the if applicable (NOT) Registered Agent's gnature required when reinstating). DATE | | | | | | | | |
| 12. | | CERS AND DIRECTORS | 1 | | | ADDITIONS/CHANGES TO OFFICE | | ORS IN 12 |
| TITLE | VP | | | 1 TITLE | | | Change | Addition |
| NAME | BENJAMIN, DANIEL | | 1 | 2 NAME | | | | |
| STREET ADDRESS | 8527 DYNASTY DR | | 1. | 3 STREE | ADDRESS | | | |
| CITY-ST-ZIP | BOCA RATON FL | | | | | | | |
| TITLE | | | | 1.4 C/IY-SI-Z/P 2.1 TITLE | | | Change | Addition |
| NAME | 22 | | 2 NAME | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | |
| CITY-ST-ZIP | | | 2 40 | | 1 | · | | |
| TITLE | DELET | | | 31 HILE | | | Change | Addition |
| NAME | | | 3 | 2 NAME | 1 | | | |
| STREET ADDRESS | | | | | ADDRESS | | | |
| CITY-ST-ZIP | | | | 4. CHY- | | | | |
| TITLE | | | | 1 HILF | | | ☐ Change | Addition |
| NAME | | _ | | 2 NAME | | | _ | |
| STREET ADDRESS | | | | | ADDRESS | | | |
| CITY-ST-ZIP | | | | 4 CITY-: | | | | |
| TITLE | | | 1 111LF | | | Change | Addition | |
| NAME | | NA | | 2 NAME | - | | | |
| STREET ADDRESS | | | | | ADDRESS | | | |
| CITY-ST-ZIP | | | | 4 CITY - : | | | | |
| TITLE | | - | | 1 1111.F | <u> </u> | | Change | Addition |
| NAME . | | L | | 2 NAME | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | |
| | | | | | | | | |
| CITY-ST-ZIP | | | | 4 CITY - : | 51 · ZIS' | | | |

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. 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 trustge 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 aftachment with an address.