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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000013079**1. Corporation Name

RIVERBANK ACCEPTANCE, INC.

14. 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 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, with all other like empowered.

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90074 004 ***150.00



Principal Place of Business Mailing Address									
100 W OAKLAN	ID PARK BLVD	800 W OAKLAND PARK BLVD							
1100 		#100 FORT LAHDEDDALE EL 22211				DO NOT WRITE IN THIS SPACE			
FORT LAUDERDALE FL 33311		FORT LAUDERDALE FL 33311 US				3. Date Incorporated or Qualifed			l
,	•					02/15/1994			
2. Principal Bl	lace of Business	· 2a. Mailing	Address			4. FEI Number	App	lied For	٠,
1	,	26	¬ ·			65-0467453		Applicable	3
Suite, Apt. #, etc.			Suite, Apt. #, etc.				\$8.75. A	dditional	
2		27	7			5. Certificate of Status Desired	Fee Rec	quired ,	
City & State		City & S	City & State			6. Election Campaign Financing	\$5.00	May Be	-
3		28				Trust Fund Contribution	Added to	Fees	
. Zip	Zip Gountry		Zip Cour			8. This corporation owes the current year Intangible			
4	25	29		0		Personal Property Tax.		□No	
	9. Name and Address of Curren	t Registered Ag	jent			10. Name and Address of New Register	red Agent		┨
200	ADI OTEVE	• ,			81 Name				
* 1,7	ABI, STEVE				82 Street Add	dress (P.O. Box Number is Not Acceptable)			1
10474 NW 11 CT PLANTATION FL 33322		•				The state of the s			
PLAI	NIAHON FL 33322	•			83			· 清洁:	
	. •				84 City	20 T 10 T	85 Zip C	ode	1
	· · · · · · · · · · · · · · · · · · ·						FL		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508,	Florida Statutes	the ab	ove-named cor by the comorat	poration submits this statement for the purpos tion's board of directors. I hereby accept the a	e of changing its i	registered iistered	
agent. I a	m familiar with, and accept the obliga	tions of, Section	607.0505, Floric	la Statu	tes.	about beard of an odderor interest, descept and			
SIGNATURE									
	Signature, typed or printed name of registered ager		(NOTE: R	<u> </u>	igent signature requi	red when reinstating) DAT		20 IN 12	1 6
12.		ID DIRECTORS	DELETE	13.	<u> </u>	ADDITIONS/CHANGES TO OFFICER	☐ Change	Addition	
TITLE	VP		L. DELETE			131 197 PM	one-igo		
NAME	BENJAMIN, DANIEL			1.2 NAN					8
STREET ADDRESS	8527 DYNASTY DR	_			EET ADDRESS	•		•	5
CITY-ST-ZIP	BOCA RATON FL		DELETE	2.1 TITL	Y-ST-ZIP		Change	Addition	8
TITLE			- DECETE						
NAME	•			2.2 NAM					
STREET ADDRESS	•				EET ADDRESS			-	
CITY-ST-ZIP		 `	DELETE	2.4 CIT	Y-ST-ZIP		. ☐ Change	Addition	1
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NAME		-		3.2 NAM					
STREET ADDRESS		_			EET ADDRESS			# 福富	
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NAME	į								
STREET ADDRESS				1	REET ADDRESS				-
CITY-ST-ZIP	-	- •	☐ DELETE	4.4 CIT	Y-ST-ZIP		☐ Change	Addition	1
TITLE				5.1 HIII	I .	Y	090		
NAME		••			REET ADDRESS	• •			
STREET ADORESS	'				Y-ST-ZIP	V 10 10 10 10 10 10 10 10 10 10 10 10 10			
CITY-ST-ZIP			DELETE	6.1 TITE		V 1 - 2 1 2 1	☐ Change	Addition	1
TITLE	1. •		□ OECETE	6.2 NAM			□ Situige	, 144,400	
NAME									
STREET ADDRESS					REET ADDRESS				-

SIGNATURE: