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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## Jan 24 1997 8:00am Secretary of State

1997

DOCUMENT # P94000049427 (5)
F&R RIVERGATE CORP.

Principal Place of Business 444 BRICKELL AVENUE STE 1001 MIAMI FL 33131		Mailing Address 444 BRICKELL AVENUE STE 1001 MIAMI FL 33131-2407			
US		US			3. Date Incorporated or Qualified 3a. Date of Last Report 03/21/1996
2. Principal Place of Business 21		2a. Mailing Address			4. FEI Number Applied For 65-0502695 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State 23		City & State			6. Election Campaign Financing \$5.00 May Be
Zip Country		Zip	Country		8. This corporation has liability for intangible tax under s. 199,032,
24	25 9. Name and Address of Curren	29 t Registered Agent	30	<del></del>	Florida Statutes Yes No  10. Name and Address of New Registered Agent
60H		i ricystered Agent	81	Name	10, Name and Address of New Registered Agent
SCHRAM, RONALD Y 444 BRICKELL AVENUE			-		
	1001		82	Street A	Address (P.O. Box Number is Not Acceptable)
	A) FL 33131		83	<b></b>	
,,,,,			<b></b>		
			84	City	FL 85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607,050 egistered agent, or both, in the State in familiar with, and accept the obligations, blief operations of equations are				corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered required when reinstating)  DATE
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
T TLE	DVS	DELETE	1.1 TITLE	Ţ	D/V/5 🗓 Change 🗌 Addition
NAME	SCHRAM, RONALD Y		1.2 NAME		
STREET ADORESS	1420 N OCEAN BLVD		1.3 STREET ADDRESS		
CHY-SI-70P	PALM BEACH FL		1.4 CITY - S		
1 TLE	DP	☐ DELETE	21 TITL€	].	D / P
NAME	HESSEL, FRANK J		2.2 NAME		
STREET ADDRESS 444 BRICKELL AVE, STE 1001			2.3 STREET ADDRESS		> 2 ± 25
C(TY - ST - Z)P	MIAMI FL DVT		2. 4 CITY -		
TOLE	MCGEE, FRANKLIN A.	∭ DELETE	3.1 TITLE		D/V/T/A5 Change Addition
NAME	444 BRICKELL AVE, STE 1001		3 2 NAME		
STREET ADDRESS	MIAMI FL		3.3 STREET		
CHY-ST-24P THILE	MICOTI I C			S1-ZIP	Change Addition
NAME			4.1 TITLE 4.2 NAME		C change T vodings
STREET ADDRESS			4.3 STREET	ADDRECE	
CHY-S1-2IF			4.4 CITY - S		
BILE		DELETE	5.1 TITLE	1-2Ir	Change Addition
NAME			5.2 NAME		_ online
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY-S1-ZIF			5.4 CITY - S		
TITLE			6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET	ADDRESS	
City-St-ZiF			6.4 CITY - S		
14. I do herel	by certify that the information supplied	with this filing does not qua	lify for the exe	mption st	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

14. To hereby certify that the information supplied with this thing does not quality for the exemption stated in Section 119 07(3)(i). Florida Statutes. If 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 recorder or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 1 or on any apachment with an address.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/97 305-377-3343