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 # **P94000081149**

CHATEAU RIVIERA, INC.

Principal Place of Business		Mailing Address				PIDIO (015 100)		
1500 VENERA	AVE.	1500 VENERA AVE.						
SUITE 1Z		SUITE 1Z		DO NOT WRITE IN TH	IIS SPACE			
CORAL GABLES FL 33146 CORAL GABLES FL 33146				3. Date Incorporated or Qualifed				
					11/04/1994			
2. Principal P	lace of Business	2a. Mailing Address		 -	4. FEI Number	Ap	plied For	
21		26		65-0551445	No	t Applicable		
	#retc.	Suite, Apt. #, etc.		* 5. Certificate of Status Desired	\$8.75 A	dditional		
22		27		S. Certificate of Status Desired				
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00			
23		28		Trust Fund Contribution	Added t	o Fees		
Zip	Country Zip		Country		8. This corporation owes the current year	Intangible Yes	□No	
24	25 29 3 9. Name and Address of Current Registered Agent		30		Personal Property Tax. 10. Name and Address of New Register			
	9. Name and Address of Current	Registered Agent	81	Name	10. Italie and Address of New Negister	o Aguin _		
SOBEL, HERBERT L								
1500 VENERA AVE.			82	Street Add	Address (P.O. Box Number is Not Acceptable)			
SUITE 1Z			83					
CORAL GABLES FL 33146			<u> </u>			00 7:- 0	`~do	
				84 City FL 85 Zip Code				
11. Pursuant to the provisions of Sections 607, 0507 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 Floridal Such shange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligators of, Section 607, 0505, Florida Statutes. SIGNATURE Signature, typed by Particular agent and the special section of the s								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	Addition	
NAME	SOBEL, HERBERT L		1.2 NAME					
STREET ADDRESS	REET ADDRESS 1500 VENERA AVE., STE. 1Z		1.3 STREET ADDRESS					
CITY-ST-ZIP			1.4 CITY-ST-ZIP					
TITLE	S DELETE		2.1 TITLE			Change	Addition	
NAME	COOPER, GLORIA		2.2 NAME					
STREET ADDRESS			2.3 STREET	TADDRESS	يرا وللمستنبي الراباريورة فا			
CITY-ST-ZIP	Miami, FL 33173		2.4 CITY-S 3.1 TITLE	T-ZIP	<u> </u>	Chann	Addition	
TITLE		☐ DELETE				☐ Change	Addition	
NAME			3.2 NAME			•		
STREET ADDRESS			3.3 STREET				•	
CITY-ST-ZIP	DELETE		3.4. CITY- S	T-ZIP	<u> </u>	Change	Addition	
TITLE	1	L] DECE !	4.1 TITLE 4.2 NAME			Cridings		
NAME	·							
STREET ADDRESS	RESS		4.3 STREET				ı	
CITY-ST-ZIP	□ DELETE		4.4 CITY+S 5.1 TITLE	1-ZiP		☐ Change	Addition	
TITLE) DECE IE		5.2 NAME	1				
NAME STREET ADDRESS	, ,			T ADDRESS				

I hereby certify that the information supplied with this indicated on this annual report or supplied with this officer or director of the corporation or the receiver or Block 12 or Block 13 if changed or on an attack the not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information tule and accurate and that my signature shall have the same legal effect as if made under oath; that I am an powerful to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

[] DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Addition

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90108 038 ***150.00