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FILED
Apr 25, 1999 8:00 am
Secretary of State

04-25-1999 90043 029 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P96000027837**

1. Corporation Name
RIVERWALK AT SUNRISE, INC.

Principal Place of Business
 7975 NW 154TH ST SUITE 400
 MIAMI LAKES FL 33016

Mailing Address
 7975 NW 154TH ST SUITE 400
 MIAMI LAKES FL 33016



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

03/28/1996

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
65-0664816

Applied For
 Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

24 Zip Country

29 Zip Country

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HODKIN, PETER M
 2101 W COMMERCIAL BLVD SUITE 4100
 FT LAUDERDALE FL 33309

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
DS	MIJARES, ANTHONY JR	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
7975 NW 154TH ST SUITE 400	7975 NW 154TH ST SUITE 400	1.3 STREET ADDRESS	
MIAMI LAKES FL 33016	MIAMI LAKES FL 33016	1.4 CITY-ST-ZIP	
DP	CARDOSO, SILVIO A	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
7975 NW 154TH ST SUITE 400	7975 NW 154TH ST SUITE 400	2.2 NAME	
MIAMI LAKES FL 33016	MIAMI LAKES FL 33016	2.3 STREET ADDRESS	
V	BRIELE, ROBERT	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
7975 NW 154TH ST. S-400	7975 NW 154TH ST. S-400	3.2 NAME	
MIAMI LAKES FL 33016	MIAMI LAKES FL 33016	3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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.

SIGNATURE:

Robert Briele
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99

305-578-2600

Date

Daytime Phone #

CR2E034 (1/198)