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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000069274 (3) DOCUMENT #

RISCAYNE SHOPPING INC

FILED Apr 07 1998 8:00am Secretary of State

DIOOA	inc onor ma, mo.									
Principal Plac	Mailing Addre	Address				- 1881 80 310 6 480 880 80	. VLAN TURN	TAINE ISHID KIDKI ID	JAN 8101 1831	
6801 HARDING AVE. 6801 HARDING AVE. #511 #511 MIAMI BEACH FL 33141 MIAMI BEACH FL 33141							DO NOT WRI	TE IN TH	IS SPACE	
							3. Date Incorporated or Qualified	d		
9 Principal P	lace of Business	2a. Mailing Ad	ddenen				08/11/1997	· · · · · · · · · · · · · · · · · · ·		
21	idoc of Eldanioga	}-¬ ~	26				59-3461886		_	pplied For ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.							Additional
22		[27]	- 1 - 1				5. Certificate of Status Desired		*	equired
City & State	e	h 1	City & State			·	6. Election Campaign Financing		\$5.00	May Be
Zip	Country	28 Zip		Count	rı (Trust Fund Contribution	<u>_</u>	***************************************	to Fees
24	25	29	30	٦	'y		8. This corporation owes or has Personal Property Tax due Jui	-		itangible ⊒ No
===	9. Name and Address of Curr			''			10. Name and Address of New I		75-	
NICHOLS, CLAUDIA					1 Nam	e				
6801 HARDING AVE.				B	2 Stree	et Addre	ss (P.O. Box Number is Not Accept	able)		
#511				8:						
MIAMI BEACH FL 33141					3					
					4 City		FL 85 Zip Code			
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Fi	orida Statutes,	the abo	ve-name	ed corpo	pration submits this statement for the			ts registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obt	ite of Florida. Such ch ligations of, Section 6/	iange was auti 07.0505, Florid	horized b la Statute	by the coes.	orporatio	oration submits this statement for the on's board of directors. I hereby acc	ept the a	ppointment as	registered
SIGNATURE										
				Registered Agent signature required				DATE		
12.	n 7P/e		DUSTE	13.			ADDITIONS/CHANGES TO OFF	ICERS A		RS IN 12
NAME	D DELETE LI DELETE			1.1 TITLE 1.2 NAME					Change	Addition
STREET ADORESS				1.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI BEACH FL 33141			1.4 CITY-		´				
TITLE			DELETE	2.1 TITLE		1			Change	Addition
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREE	ET ADDRES	5				
CITY-ST-ZIP		· ····-		2 4 CITY		<u> </u>				
TITLE		LJ	DELETE	3.1 TITLE					Change	Addition
NAME CIRCL ADDOCCO				3.2 NAME						
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS	3				
TITLE			DELETE	3.4. TY	- ST- ZIP				Change	Addition
NAME				4. 2 M						beed reportedly
STREET ADDRESS					Et addres:	3				
CITY-ST-ZIP				4.45 Y-	ST-ZIP					
TITLE			DELETE	5.1 T LE					Change	Addition

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 suppliemental 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

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6 3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE: X

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

DELETE

04/02/98 (305) 866-7311

Addition