

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2000 8:00 am
Secretary of State
 09-11-2000 90004 006 ***550.00

DOCUMENT # P98000013862

1. Entity Name
RIVIERA RESTAURANT HOLDINGS CORP.

Principal Place of Business
505 N ATLANTIC BLVD
FT. LAUDERDALE FL 33304

Mailing Address
505 N ATLANTIC BLVD
FT. LAUDERDALE FL 33304

UU084645



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3001 HARBOR DRIVE
 Suite, Apt. #, etc.
FT. LAUDERDALE
 City & State
FL 33316

3. Mailing Address
3001 HARBOR DR.
 Suite, Apt. #, etc.
FT. LAUDERDALE, FL
 City & State
33316

4. FEI Number **65-0918932**
 Applied For
 Not Applicable

Zip Country
33316 BROWARD

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

6. Name and Address of Current Registered Agent

GRISWOLD, ROBERT
505 N ATLANTIC BLVD
FT. LAUDERDALE FL 33304

7. Name and Address of New Registered Agent

Name **GRISWOLD, ROBERT**
 Street Address (P.O. Box Number is Not Acceptable)
3001 HARBOR DRIVE
FT. LAUDERDALE, FL 33316
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE **DST**
 NAME **MAURER, LAURENCE A**
 STREET ADDRESS **505 N ATLANTIC BLVD**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE **DP**
 NAME **GRISWOLD, ROBERT**
 STREET ADDRESS **505 N ATLANTIC BLVD**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE
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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DST**
 NAME **MAURER, LAURENCE**
 STREET ADDRESS **3001 HARBOR DR.**
 CITY-ST-ZIP **FT. LAUDERDALE, FL 33316**

TITLE **DP**
 NAME **GRISWOLD, ROBERT**
 STREET ADDRESS **3001 HARBOR DR.**
 CITY-ST-ZIP **FT. LAUDERDALE, FL 33316**

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 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE RE...**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/5/00 463-3302
 Date Daytime Phone #

CR2E034 (5/00)