

05-02-2003 90385 014 ***150.00

FILED

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03 MAY 20 PM 3:47

TALLAHASSEE, FLORIDA

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #P98000048329

1. Entity Name
CHANSE RIVERA ENTERPRISES, INC.

90120987

Principal Place of Business
5900 SW 85TH STREET
S MIAMI, FL 33143Mailing Address
5900 SW 85TH STREET
S MIAMI, FL 33143

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0838880Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$0.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RIVERA, CHANG
5900 SW 85TH STREET
S MIAMI, FL 33143

Name

Street Address (P.O. Box Number Is Not Acceptable)

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

NAME, Registered Agent (typed or printed name and address)

DATE

FILE NOW! FEE IS \$150.00.
After May 1, 2003 Fee will be \$550.00.
Make Check Payable to Florida Department of State.9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	D RIVERA, CHANSE	503 MENENDEZ AVE	CORAL GABLES, FL 33146	☐
				☐
				☐
				☐
				☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

12. 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 10 or Block 11 if changed, or on an attaching address, with all other like employees.

SIGNATURE:

Signature and typed or printed name of signing officer or director

CHANSE RIVERA

Date

Signature Printed

4/24/03 561-60-3515

CR2034 (1/02)