FILED 2000 UNIFORM BUSINESS REPORT (UBR) Apr 24, 2000 8:00 am Secretary of State DOCUMENT # P9800060940 -1. Entity Name

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Name

City

Mailing Address

3. Mailing Address

City & State

Zip

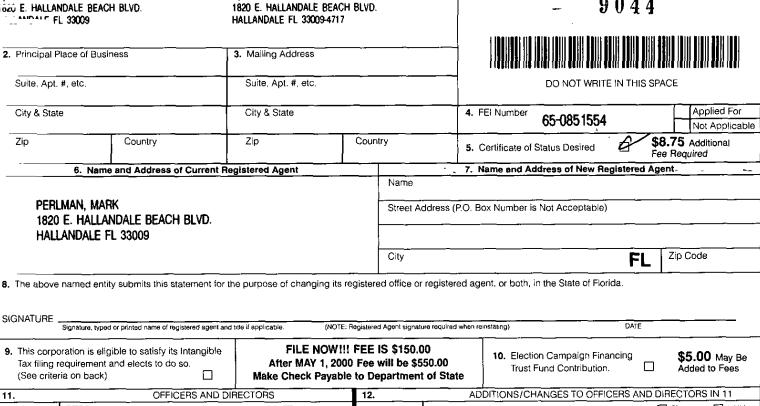
Suite, Apt. #, etc.

C/O MARK PERLMAN, P.A. 1820 E. HALLANDALE BEACH BLVD.

HALLANDALE FL 33009-4717

04-24-2000 90844 001 *****8.75 04-24-2000 90844 002 ***150.00

9044



(See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition **PTSD** ☐ Delete TITLE TITLE NAME NAME LEVIN, SUZANNE STREET ADDRESS STREET ADORESS 21399 MARINA COVE CIRCLE SUITE M-14 CITY-ST-ZIP CITY-ST-7IP **AVENTURA FL 33180** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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.

DON RIVERA, INC.

Principal Place of Business MARK PERLMAN, P.A.

iőző E. HALLANDALE BEACH BLVD. **!DALE FL 33009

2. Principal Place of Business

PERLMAN, MARK

HALLANDALE FL 33009

Country

1820 E. HALLANDALE BEACH BLVD.

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

6. Name and Address of Current Registered Agent

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

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

SIGNATURE: NTED NAME OF SIGNING OFFICER OF DIRECTOR

CR2E034 (9/99