

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 243796

Name

ROYAL POINCIANA TRAVEL, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90071 001 ***150.00

Principal Place of Business Mailing Address
 ROYAL POINCIANA PLAZA 332-B ROYAL POINCIANA PLAZA
 BOX 1061 P.O. BOX 1061
 BEACH FL 33480 PALM BEACH FL 33480-1061

Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Country Zip Country

4. FEI Number **59-0918532**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

ZMISTOWSKI, ANTHONY R
 332 B. ROYAL POINCIANA PLAZA
 PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 Anthony R. Zmistowski 4/10/00
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	TITLE	NAME	STREET ADDRESS
<input type="checkbox"/> Delete	HOWLEY, JOAN	1331 N "K" STREET LAKE WORTH FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete	VD RIERA, MIGUEL	3800 WASHINGTON ROAD APT. 902 WEST PALM BEACH FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete	PD ZMISTOWSKI, ANTHONY	8550 NASHUA DRIVE PALM BEACH GARDENS FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete	SD ZMISTOWSKI, MARTHANN	8550 NASHUA DRIVE PALM BEACH GARDENS FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		

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: Anthony R. Zmistowski
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/99)