

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90035 026 ****70.00



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| DOCUMENT # 715026 | | 1. Entity Name ROYAL BAHAMIAN ASSOCIATION, INC. | |
| Principal Place of Business 1101 NE MIAMI GARDENS DRIVE MIAMI FL 33179 | | Mailing Address 1101 NE MIAMI GARDENS DRIVE MIAMI FL 33179 | |
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | | Country | |
| 4. FEI Number 59-1224627 | | Applied For Not Applicable | |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | | \$8.75 Additional Fee Required | |



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| 6. Name and Address of Current Registered Agent UNIVERSAL PROPERTY MANAGEMENT 1380 NE MIAMI GARDENS DR SUITE 250 230 MIAMI FL 33179 | | 7. Name and Address of New Registered Agent Name: Universal Property Management Street Address (P.O. Box Number is Not Acceptable): 1380 NE Miami Gardens Dr. Suite 230 City: Miami FL Zip Code: 33179 | |
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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: *Yvonne Barcoy* DATE: **1-23-08**

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| FILE NOW: FEE IS \$61.25 Due By May 1, 2008 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | Make Check Payable to Florida Department of State |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|--|--|--|--|
| TITLE: D NAME: JOSEPH, ADA STREET ADDRESS: 1075 NE MIAMI GARDENS DR #806 #806W CITY-ST-ZIP: MIAMI FL 33179 | <input type="checkbox"/> Delete | TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: P NAME: TURTULA, GUSTAVO STREET ADDRESS: 1175 NE MIAMI GARDENS DR #702E 702E CITY-ST-ZIP: N MIAMI BEACH FL 33179 | <input type="checkbox"/> Delete | TITLE: P. NAME: GUSTAVO TURTULA STREET ADDRESS: 1175 NE MIAMI GARDENS DR CITY-ST-ZIP: #702E N. MIAMI BEACH FL 33179 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: VP NAME: COHEN, ABRAHAM D STREET ADDRESS: 1075 NE MIAMI GARDENS DR #702W CITY-ST-ZIP: MIAMI FL 33179 | <input type="checkbox"/> Delete | TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: T NAME: FEDER, ESTHER STREET ADDRESS: 1175 NE MIAMI GARDENS DR. #109E CITY-ST-ZIP: NORTH MIAMI BEACH FL 33179 | <input type="checkbox"/> Delete | TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: S NAME: MORENO, JOHN STREET ADDRESS: 1175 NE MIAMI GARDENS DR. 311E CITY-ST-ZIP: N MIAMI BEACH FL 33179 | <input type="checkbox"/> Delete | TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: D NAME: CHOZE, DIAGO STREET ADDRESS: 1075 NE MIAMI GARDENS DR CITY-ST-ZIP: MIAMI FL 33179 | <input checked="" type="checkbox"/> Delete | TITLE: D. NAME: GINETTE LELIEVRE STREET ADDRESS: 1075 NE MIAMI GARDENS DR. CITY-ST-ZIP: #510W MIAMI, FL 33179 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Esther Feder* DATE: **1/28/08**