

2001 UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **F99000005221**

1. Entity Name

ROYAL EQUIPMENT INTERNATIONAL, INC.**FILED**
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 90027 015 ***150.00

Principal Place of Business

Mailing Address

**2050 NW 95TH AVE
MIAMI FL 33172****2050 NW 95TH AVE
MIAMI FL 33172**

J A J U J U

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

31-1276426

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HERREN, JOHN
2050 NW 95TH AVE
MIAMI FL 33172**

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.

SIGNATURE

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

(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 \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PCD	KINTIGH, ALLEN	39 S. ASHLEY GREEN	THE WOODLANDS TX 77382	<input type="checkbox"/>
VD	KINTIGH, DAVID	2 SENIC MILL PLACE	THE WOODLANDS TX 77381	<input type="checkbox"/>
ST	BAUMAN, THOMAS A	14 WILLOWCREST PLACE	THE WOODLANDS TX	<input checked="" type="checkbox"/>
Secretary				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Chairman				<input checked="" type="checkbox"/>	<input type="checkbox"/>
President				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
Secretary	Lisa Kintigh	2 Senic Mill Place	The Woodlands, Tx 77382	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vice President	John Herren	2050 NW 95th Ave	Miami FL 33172	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/01

Date

281-292-1490

Daytime Phone #

CR2E034 (10/00)