FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H33695 (8)

FILED Feb 24 1998 8:00am Secretary of State

1, Corporatio		(0)	,			
ROYAL	TOUCH INTERNATIONAL,	INC.	er e tre	Markfam v		<u> </u>
Principal Plac	e of Business	Mailing Address				ingar onak olah olah olah olah deri
% HENDERIKA G. VAN SOESTBERGEN % HENDERIKA G. VAN SOE				-N	·	
6651 N.W. 23RD AVENUE 6651 N.W. 23RD AVENU					DO NOT WEITE IN THIS SELEC	
GAINESVILLE	FL 32606	GAINESVILLE FL 3	12606		DO NOT WRITE II	THIS SPACE
					3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Addres			01/01/1985 4. FEI Number	I Jannied For
1	face of Edsiness	26				Applied For Not Applicab
Suite, Apt. #, etc Suite.			#. etc.		59-2474799	CO 75 Additional
2 27					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
3		28				Added to Fees
Zip	Country	Žipi	Count	(y	8. This corporation owes or has paid	the current year Intangible
4	25	29	30		Personal Property Tax due June 3	D. Yes No
	9. Name and Address of Curre	ant Registered Agent			10. Name and Address of New Regi	stered Agent
VAN SOESTBERGEN, HENDERIKA G.				1 Name	•	
665	51 N.W. 23RD AVENUE		8:	2 Street Add	fress (P.O. Box Number is Not Acceptable)
GA	inesville fl 32606				(
			8:	3		
			8	4 City		85 Zip Code
				1 ′		
agent La SIGNATURE	im familiar with, and account the oblig Signature, typed or proved name of registering ag				poration submits this statement for the pur tion's board of directors. I hereby accept ared when reinstating)	DATE
12.	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TUTE	DV	☐ D£LE	TE 1.1 TITLE		·	☐ Change ☐ Additio
NAME	VAN SOESTBERGEN, H.		1.2 NAM6	<u>:</u>		
STREET ADDRESS	6651 N.W. 23RD AVENUE		1.3 STREI	ET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL		1.4 CITY	-ST-ZIP	t .	
TITLE	D	☐ DELE	TE 21 TITLE	l		L. Change L. Additio
NAME	VAN SOESTBERGEN, ANTO	N W	2 2 NAMI	<u> </u>		
STREET ADORESS	6651 N.W. 23RD AVENUE		2.3 STAE	ET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL		2. 4 CITY			The state of the s
TITLE		DELE				Change Addition
NAME			3.2 NAME			
STREET ADDRESS			1	E1 ADDRESS		
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NAME			4. 2 NAM			
STREET ADORESS				ET ADDRESS		
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NAME			5.2 NAME	ī		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELE	5.4 CITY - TE 6.1 TITLE			☐ Change ☐ Additio
TITLE		L_J PCCC				Chount Change
NAME			6.2 NAME	1		
STREET ADORESS				ET ADDRESS		
CITY-ST-ZIP	L		64 CITY-	51-ZIP		

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ennual report or supplemental annual 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 13 if changed by on an attachment with an address.

352 376-1640