

**FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #

1. Entity Name

ROYAL BLUE TRAVEL, INC.

374117

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5525 NW 15th Avenue

Suite, Apt. #, etc.

1st floor

City & State

Ft. Lauderdale, FL

Zip

33309

Country

USA

3. Mailing Address

2085 HURONTARIO STREET

Suite, Apt. #, etc.

SUITE #200

City & State

MISSISSAUGA, ONTARIO

Zip

L5A 4G1

Country

CANADA

4. FEI Number

59-2812008

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

DEBBIE ROTHSCHILD

Street Address (P.O. Box Number is Not Acceptable)

5525 NW 15th Avenue

1st floor

City

Ft. Lauderdale

FL

Zip Code

33009

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)

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)



January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DS
NAME	DEBBIE ROTHSCHILD
STREET ADDRESS	5525 NW 15th Avenue, 1st floor
CITY - ST - ZIP	Ft. Lauderdale, Florida 33309
TITLE	DPT
NAME	LARRY CAROE
STREET ADDRESS	2085 HURONTARIO STREET, SUITE #200
CITY - ST - ZIP	MISSISSAUGA, ONTARIO, CANADA, L5A4G1
TITLE	VP
NAME	CLINTON YUEN
STREET ADDRESS	2085 HURONTARIO STREET, SUITE #200
CITY - ST - ZIP	MISSISSAUGA, ONTARIO, CANADA, L5A4G1
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***1200.00 ***150.00

Filed
3/29/02

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 on an attachment with an address, with all other like empowered.

SIGNATURE: CLINTON YUEN

May 1, 2002 (905) 803-8898