FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jun 26, 2002 8:00 am K71385 DOCUMENT # **Secretary of State** 1. Entity Name 06-26-2002 90071 029 ***150.00 ROYAL MONOGRAMMING, INC. Principal Place of Business Mailing Address 273 MINORCA 273 MINORCA MIAMI FL 33134 MIAMI FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0115273 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PASTRANA. GEORGELINA Street Address (P.O. Box Number is Not Acceptable) 273 MINORCA CORAL GABLES FL 33134 Zip Code FŁ 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Delete TITLE Change Addition PASTRANA, GEORGELINA NAME NAME 6221 S.W. 20TH TERRACE STREET ADDRESS STREET ADDRESS MIAMI FL 33155-2054 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change _ ☐ Addition TITLE NAME PASTRANA, EDWARD NAME 6221 S.W. 20TH TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP* CITY-ST-ZIP MIAMI FL 33155-2054 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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.

A A) AA

Attachment D#KN1385 BD125872

June 22, 2002

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Gentlemen:

This form was delivered to me on June 17, 2002 by the USPO. As you can see, as soon as I realized what it was, I rushed to write the check and sign it.

I don't think I should be penalized for this, since the form was late in reaching me. I work alone, with occasional part time help sewing monograms, and unless I receive a form, I don't really have the system to detect that something is missing, except for my sales tax.

Sincerely,

Royal Monogramming, Inc. Georgelina Pastrana