FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 18 AM 8:36

DOCUMENT # **L54832** **(5)**

1. Corporation Name
ROYAL CLASS IMPORT-EXPORT CORP.

Principal Place of Business	Mailing Address
% BERNARD Z. GREENBERG 2513 N. GULF BLVD. P.O. BOX 248 34635-7248	% BERNARD Z. GREENBERG 2513 N. GULF BLVD. P.O. BOX 248 34635-7248

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/05/1990	3a. Date of Last Report: 02/14/1994
4. FEI Number: 59-3001855	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. Is corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.: 22	Suite, Apt. #, etc.: 27
City & State: 23	City & State: 28
Zip: 24 / Country: 25	Zip: 29 / Country: 30

9. Name and Address of Current Registered Agent

GREENBERG, BERNARD Z.
2513 N. GULF BLVD.
INDIAN ROCKS BEACH FL 34635-0248

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: (Signature, typed or printed name of registered agent and title if applicable) (Date) (Registered Agent's signature required if item 10 is completed)

12. OFFICERS AND DIRECTORS		13. ADDITION, CHANGE OR DELETION OF OFFICER AND/OR DIRECTOR	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	LICHTENDAHL, KENNETH	52 NAME	
STREET ADDRESS	% 3264 HILDRETH AVE	53 STREET ADDRESS	
CITY ST ZIP	CINCINNATI OH	54 CITY ST ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	LICHTENDAHL, CHARLES	62 NAME	
STREET ADDRESS	3264 HILDRETH AVE.	63 STREET ADDRESS	
CITY ST ZIP	CINCINNATI OH	64 CITY ST ZIP	
TITLE	D	71 TITLE	☐ Change ☐ Addition
NAME	GREENBERG, BERNARD Z.	72 NAME	
STREET ADDRESS	2513 N. GULF BLVD.	73 STREET ADDRESS	
CITY ST ZIP	INDIAN ROCK BCH FL	74 CITY ST ZIP	
TITLE		81 TITLE	☐ Change ☐ Addition
NAME		82 NAME	
STREET ADDRESS		83 STREET ADDRESS	
CITY ST ZIP		84 CITY ST ZIP	
TITLE		91 TITLE	☐ Change ☐ Addition
NAME		92 NAME	
STREET ADDRESS		93 STREET ADDRESS	
CITY ST ZIP		94 CITY ST ZIP	
TITLE		101 TITLE	☐ Change ☐ Addition
NAME		102 NAME	
STREET ADDRESS		103 STREET ADDRESS	
CITY ST ZIP		104 CITY ST ZIP	

14. To the best of my knowledge, the information supplied with this report is true and accurate and that my signature shall serve 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 12 or Block 13 if changed, or added, above with an address.

SIGNATURE: Bernard Greenberg Pres 1/12/95 813 596-3480
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

0370631 CP