2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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Principal Place of Business				Mailing Address					, WEEN	ภคจระ	t, FLOF	RIDA	i
2808 N.E. 32ND STREET				2808 N.E. 32ND STREET									
LIGHTHOUSE	POINT FL 33	1064	. LIC	GHTHOUSE POINT FL	33064								
2. Principal Place of Business			3. N	3. Mailing Address				·			HEINI EDINE 1198		
Suite, Apt.	#, etc.		Sı	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State	<del> </del>	* <u>* * *</u>	c	ity & State	•	<u>- '</u>		4. FEI Number   Applied Fi					olied For
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Zip		Country	Zi	ip	Coun	ntry	5.	Certificate of	Status Desire	d 🔲	<b>\$5.00</b> Fee Re		
	6. Name	and Address of Cui	rrent Registe	ered Agent		News	7.	Name and A	ddress of Nev	w Register	ed Agent		
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ROYAL PA	ALM BEACI	H FL 33411 y submits this statem		applicable. (NO	E: Registere	ed office or	ure required when r		in the State of	Florida.			
ROYAL PA	named entity	H FL 33411 y submits this statem		applicable. (NO	E: Registere	ed office or od Agent signatu	are required when r	reinstating)	in the State of	Florida.			
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954-411 - 1735 Daytime Phone \*