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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # M07181

(4)

ROYALE GEM, INC.

FILED May 07 1998 8:00am Secretary of State

Principal Pla	ce of Business	Mailing Address			"				
17971 BISC	AYNE BLVD.	17971 BISCAYNE BLVD.			}				
104 N. Miami Beach Fl 33160		104 N. Miami Beach Fl. 33160				DO NOT WRITE IN THIS SPACE			
					3. Date	Incorporated or Qua	alified		
					10,	/31/1984			
2. Principal Place of Business		2a. Mailing Address			4. FEII	Number		A	pplied For
21		26			5	9-2470052		N	lot Applicable
Suite, Ap	t#, etc.	Suite, Apt. #, otc.			5. Cert	ificate of Status Desi	red 🗆		Additional
22		27				····			tequired
City & Sta	ato	City & State			I	tion Campaign Finan			May Be
23 Zip	Country	28 Zip	Count	tru		t Fund Contribution			to Fees
24	25	Ha	30	иy	l l	corporation owes or onal Property Tax du		turrent year In Yes	yangible No
241	9. Name and Address of Curren	[29] It Registered Agent	130]			ne and Address of N			4
14	ARGULES, LEON, ESQUIRE		8	11 Nam				<u> </u>	
	DO E BROWARD BLVD		Ļ						
	TE 1210		8	2 Stree	et Address (P.O. B	ox Number is Not Ac	cceptable)		
_	LAUDERDALE FL 33301		8	3					
1	CAUDERDALL I E 3300 I		L						
			8	4 City			F	85 Zip	Code
11. Pursuan	t to the provisions of Sections 607,050	2 and 607 1508 Florida Stati	ites, the abo	ve-name	ed corporation sub	mits this statement to	or the purpose	of changing	its registered
RIGNATURE					orporation's board				
SIGNATURE	Stgrature typed or protest name of registerics sign		ItE Begistered A		ure fequired when reinsta	iting) TIONS/CHANGES TO	DATE OFFICERS A	ND DIRECTO	RS IN 12
	Signature typed or printed more of registered age			Agent signati	ure fequired when reinsta			ND DIRECTO	
12.	Signature Typed or printed name of repotency age OFFICERS AND	D DIRECTORS	13.	Agent signati	ure required when reinsta				
12. TITLE	Signature Apped on product narrow of registered sign OFFICERS AND OMRAMI, ELYAHOO	D DIRECTORS	13. 11 TITLE 12 NAM	Agent signati	PSM Elyaho	o Omrami			
12. TITLE MAME	Signature Apped or product name of registered age OFFICERS AND PSM OMRAMI, ELYAHOO	D DIRECTORS	13. 1 1 TITLE 1 2 NAM 1.3 STRE	Agent signati	PSM Elyaho 37 Woo	TIONS/CHANGES TO O Omrami d Road		Change	
12. TITLE NAME STREET ADDRESS	OFFICERS AND OFFICERS AND OMRAMI, ELYAHOO 732 NE. 206TH STREET	D DIRECTORS	13. 1 1 TITLE 1 2 NAM 1.3 STRE	er Address FT Address -ST-ZIP	PSM Elyaho 37 Woo	o Omrami	OFFICERS A	Change	☐ Addition
12. TITLE MAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND OFFICERS AND OMRAMI, ELYAHOO 732 NE. 206TH STREET	DIDIRECTORS DEFFE	13. 11 TITLE 12 NAM 1.3 STRE 1.4 CITY	egent signature E ET ADDRESS -ST-ZIP	PSM Elyaho 37 Woo	TIONS/CHANGES TO O Omrami d Road	OFFICERS A	Change	☐ Addition
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• Hereby certify that the information tupple civith 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 annual report is 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 corpor herby therby the corpor many that my name appears in Block 12 or Block 13 if changes, or whan attackment with an address.

SIGNATURE

Elyahoo Omrami (president) 04-29-1998