

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

APPROVED
AND
FILED

99 APR 30 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0360084

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M69516 1. Corporation Name ROYAL PALM CAPITAL, INC.			
Principal Place of Business 340 ROYAL PALM WAY 300 PALM BCH FL 33480 US		Mailing Address 340 ROYAL PALM WAY 300 PALM BCH FL 33480 US	
2. Principal Place of Business 21 223 Sunset Ave. Suite, Apt. #, etc 22 Suite 223 City & State 23 Palm Beach, FL Zip Country 24 33480 25 USA		2a. Mailing Address 26 223 Sunset Ave. Suite, Apt. #, etc 27 Suite 223 City & State 28 Palm Beach, FL Zip Country 29 33480 30 USA	
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324			
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 <i>Michael V. Mitrione</i> Michael V. Mitrione, Vice President Signature typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when re-statuting)			
12. OFFICERS AND DIRECTORS 11 TITLE <input type="checkbox"/> DELETE 12 NAME MARK W. COOK 13 STREET ADDRESS 340 ROYAL PALM WAY 223 Sunset Ave. 14 CITY-ST-ZIP PALM BEACH FL 33480 15 TITLE <input checked="" type="checkbox"/> DELETE 16 NAME COOK, EDWARD W. 17 STREET ADDRESS 340 ROYAL PALM WAY 223 Sunset Ave. 18 CITY-ST-ZIP PALM BCH FL 33480 19 TITLE <input type="checkbox"/> DELETE 20 NAME 21 STREET ADDRESS 22 CITY-ST-ZIP 23 TITLE <input type="checkbox"/> DELETE 24 NAME 25 STREET ADDRESS 26 CITY-ST-ZIP 27 TITLE <input type="checkbox"/> DELETE 28 NAME 29 STREET ADDRESS 30 CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 12 NAME 13 STREET ADDRESS 300002859583-0 14 CITY-ST-ZIP 15 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 16 NAME 17 STREET ADDRESS 18 CITY-ST-ZIP 19 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 20 NAME 21 STREET ADDRESS 22 CITY-ST-ZIP 23 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 24 NAME 25 STREET ADDRESS 26 CITY-ST-ZIP 27 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 28 NAME 29 STREET ADDRESS 30 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.03(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or 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 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 on an attachment with an address, with all other like empowered

SIGNATURE: *Mark W. Cook* **Mark W. Cook, Vice President**

0360084 (11/08)