

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089017

FILED
Apr 15, 2009
Secretary of State

Entity Name: ROYAL OAKS PLAZA, INC.

Current Principal Place of Business:

C/O REIMS, LLC. 425 W. 41ST STREET
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

425 W. 41ST STREET
MIAMI BEACH, FL 33140 US

Current Mailing Address:

P.O. BOX 6418
SURFSIDE, FL 33154 US

New Mailing Address:

C/O REIMS, LLC
P.O. BOX 6481
SURFSIDE, FL 33154 US

FEI Number: 65-1047857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUARCH, J.M. ESQ
255 UNIVERSITY DR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NEVAREZ, RICARDO A
Address: P.O. BOX 5916
City-St-Zip: SURFSIDE, FL 33154

Title: VSD () Delete
Name: NEVAREZ, ALICIA E
Address: P.O. BOX 5916
City-St-Zip: SURFSIDE, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IRENE DE LOS REYES

ACCT

04/15/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date