

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014582

Entity Name: T ROYALE 4202 CORP.

FILED
Feb 01, 2009
Secretary of State

Current Principal Place of Business:

335 SO BISCAYNE BLVD.
SUITE #2906
MIAMI, FL 33131 US

Current Mailing Address:

335 SO BISCAYNE BLVD.
SUITE #2906
MIAMI, FL 33131 US

New Principal Place of Business:

888 BISCAYNE BLVD.
APT. #2711
MIAMI, FL 33132 US

New Mailing Address:

888 BISCAYNE BLVD.
APT. #2711
MIAMI, FL 33132 US

FEI Number: 20-0066785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LUCES, RAFAEL
335 SO BISCAYNE BLVD.
SUITE 2906
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

LUCES, RALPH
888 BISCAYNE BLVD.
APT. #2711
MIAMI, FL 33132 US

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: RALPH LUCES

02/01/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: LUCES, RAFAEL
Address: 335 SO BISCAYNE BLVD. SUITE #334
City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: LUCES, RALPH
Address: 888 BISCAYNE BLVD. APT. #2711
City-St-Zip: MIAMI, FL 33132 US

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: RALPH LUCES

PS

02/01/2009

Electronic Signature of Signing Officer or Director

Date