## 2007 FOR PROFIT CORPORATION **FILED** ANNUAL REPORT Apr 26, 2007 08:00 AM Secretary of State **DOCUMENT # P03000095378** 1. Entity Name ROYAL TRANSPORTATION SERVICES, INC. Principal Place of Business Mailing Address 10800 NW SOUTH RIVER P.O. BOX 821700 PEMBROKE PINES, FL 33082 MEDLEY, FL 33178 02132007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 75-3128900 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ACHARANDIO, OSCAR DO NOT WRITE 5465 SW 187 TERRACE MIRAMAR, FL 33029 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ACHARANDIO, OSCAR NAME STREET ADDRESS 5465 SW 187 TERR MIRAMAR, FL 33029 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

## DO NOT WRITE IN THIS SPACE

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

TITLE NAME STREET ADDRESS

Applied For

Not Applicable