

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000125565

FILED
May 22, 2009
Secretary of State

Entity Name: ROYAL PALM NUTRITION CENTER, INC.

Current Principal Place of Business:

6582 N STATE ROAD 7
COCONUT CREEK, FL 330733625

New Principal Place of Business:

Current Mailing Address:

6582 N STATE ROAD 7
COCONUT CREEK, FL 330733625

New Mailing Address:

FEI Number: 26-1454817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCUPAY SERVICES CORP.
NORTH PINE ISLAND ROAD, STE. 216
PLANTATION, FL 33322 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: YIBIRIN, BERNARDO
Address: 6582 N STATE ROAD 7
City-St-Zip: COCONUT CREEK, FL 330733625

Title: D () Delete
Name: YIBIRIN, MARIA
Address: 6582 N STATE ROAD 7
City-St-Zip: COCONUT CREEK, FL 330733625

Title: D () Delete
Name: YIBIRIN, SERGIO
Address: 6582 N STATE ROAD 7
City-St-Zip: COCONUT CREEK, FL 330733625

Title: D () Delete
Name: YIBIRIN, GINETH
Address: 6582 N STATE ROAD 7
City-St-Zip: COCONUT CREEK, FL 330733625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BERNARDO YIBIRIN

OWNE

05/22/2009

Electronic Signature of Signing Officer or Director

Date