## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

P9300000536 (1)

LUCKY ROYAL, INC.

Principal Place of Business Mailing Address								
5761 N.W. 37TH AVE. MIAMI FL 33142		5761 N.W. 37TH AVE. MIAMI FL 33142						
					3. Date Incorporated or Qualified 01/05/1993	3a. Date 05	/01/199	)5
2. Principal Pla 21 3550	BISCAYNE Blvd.	26 3550 Biscayne Blud.		4. FEI Number 65-0389285	Applied For Not Applicable			
Suite, Apt. #, etc. 22 STE: #404		Suite, Apt. #, etc. 27 StE: # 404		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State 23 11A011 F/		City & State 28 HIAHI, F/		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip 29 .33.13.7	Country 30 US	4	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
24 <i>3</i> 3/3	9. Name and Address of Curre		30 0	10. Name and Address of New Registered Agent				
	S. Home one reading		81	Name			<del></del>	
HOLLAND, BRIAN				82 Street Address (P.O. Box Number is Not Acceptable)				
5761 NW Miami Fl	/ 37TH AVENUE _ 33142		83	1				
, , , , , , , , , , , , , , , , , , ,			84	City		FL	85 Zij	Code
11 Dureuant to	the provisions of Sections 607 05	02 and 607 1508. Florida Statute	s the above	named corpora	ation submits this statement for the pu	iroose of chai	nging its r	egistered office
or registers	ed agent, or both, in the State of Flo h, and accept the obligations of, Se	orida. Such change was authorize	ad by the corr	poration's board	d of directors. I hereby accept the app	pointment as i	registered	agent. I am
SIGNATURE _	Signature, typed or printed name of registered ag-	oot and title if applicable (NO	16: Registered Age	ent signature required	when reinstation	DATE		
12.		DIRECTORS 13.		and algebra a radione's	ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
TOTLE	D	☐ DELETE	1 1 TITLE				] Change	Addition
NAME	DULMAN, SIDNEY		12 NAME					
STREET ADDRESS	5761 N.W. 37 AVE.		1.3 STREET ADDRESS					
C(1Y-S1-Z(P	MIAMI FL 33142		1.4 CITY-ST-ZIP				7 6	- 1240in
TITLE	D DOLLAND BOLAN	☐ DELETE	2. 1 TITLE			L	] Change	☐ Addition
NAME	HOLLAND, BRIAN		2 2 NAME					
STREET ADDRESS	5761 N.W. 37 AVE.		2 3 STREET ADORESS 2 4 CITY - ST - ZIP					
C/TY-ST-Z/P TITLE	MIAMI FL 33142	☐ DELÉTE	3 1 TITLE				] Change	Addition
NAME		_	3.2 NAME					
STREET ADDRESS			3.3. STREE	ET ADDRESS				
CITY-S1-ZIP			3.4 CITY - ST - ZIP					
THILE	☐ DELETE 4 1		4 1 TITLE				] Change	Addition Addition
NAME			4 2 NAME					
STREET ADDRESS				ET ADDRESS				
CITY+S1-ZIP		רין חבו בזב	4.4 CITY -				Change	Addition
TITLE			5 1 TITLE 5.2 NAME			L.	T avendo	
NAME CAUSEL ADDRESS			1	ET ADDRESS				
STREET ADDRESS			5.4 CITY -	Ì				
CITY-ST-7IP TITLE			6 1 TITLE				Change	Addition
NAME		_	6.2 NAME					
STREET AUDRESS			6.3 STREE	ET ADDRESS				
CITY-ST-ZIP			6.4 C/TY-	į į				
14 Ldo bereb	v certify that the information supplie	ed with this filing is voluntarily furn			or the exemption stated in Section 11	9.07(3)(k), Flo	rida Statu	tes. I further

I do nereby certify that the information supplied with this liting is voluntarily furnished and does not quality for the exemption stated in Section 119.0/(3)kg, 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 emporred to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIDNEY DULMAN 4/14/96 576-1600

A INDICADA AIR INICO JESTI RUTEI NAMA ROJEI ANDII ROSTI NAIRI RIICO AIRI AIRI AIRI AIRI