

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000034552 (8)**

1. Corporation Name

ROYAL ATLANTIC HEALTH SPA, INC.



Principal Place of Business

**1460 SOUTH OCEAN BLVD.
POMPANO BEACH FL 33062**

Mailing Address

**1460 SOUTH OCEAN BLVD.
POMPANO BEACH FL 33062**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

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Zip

Country

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2a. Mailing Address

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Suite, Apt. #, etc.

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City & State

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Zip

Country

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30

g. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES INC.
1201 HAYS STREET
TALLAHASSEE FL 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

05/12/1993

3a. Date of Last Report

03/07/1995

4. FEI Number

65-0408359

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Agent for Change of Registered Office

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**VPD
LEBOVIC, HAROLD
1460 S OCEAN BLVD.
POMPANO BEACH FL**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**PD
PINE, MORTON
3400 GALT OCEAN DRIVE, APT. 1805 SO
FT. LAUDERDALE FL**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**STD
PINE, PHILIP
3200 NE 57TH COURT
FT LAUDERDALE FL**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**D
WEINISCH, RONALD
902 E 8TH STREET
BROOKLYN NY**

TITLE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

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