## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000039567 (1)

ROYAL MARKETING INTERNATIONAL, CORP. Principal Place of Business Mailing Address 12834 SW 119 TERR. 12834 SW 119 TERR. MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/04/1993 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 26 21 65-0401938 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes Yes 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name NARCIANDI, FERNANDO M 12834 SW 119 TERR. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33186 83 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS RS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE

NARCIANDI, FERNANDO M 1.2 NAME STREET ADDRESS 12834 SW 119 TERR. 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ★ Addition TITLE 2.1 TITLE NAME 2.2 NAME Kock Ko. STREET ADORESS 2.3 STREET ADDRESS 2. 4 CITY - ST-ZIP CITY-ST-ZIP Change TITI F 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS スマンノ 3.4. CITY-ST-ZIP CITY-ST-ZIF Change Addition 4.1 TITLE TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP City-St-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIF Addition DELETE Change TITLE 6.1 TITLE NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE PROPERTY

10 - 187/2 Daytime Phone # 0

**FILED** 

Jan 21 1998 8:00am

Secretary of State