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

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 17, 1999 8:00 am
Secretary of State
05-17-1999 90039 023 ***150.00

DOCUMENT # P93000039567

1. Corporation Name
ROYAL MARKETING INTERNATIONAL, CORP.

Principal Place of Business	Mailing Address
12834 SW 119 TERR. MIAMI FL 33186 US	12834 SW 119 TERR. MIAMI FL 33186 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Street Address, Suite, Apt. #, etc.
City & State
Zip / Country

2a. Mailing Address
Suite, Apt. #, etc.
City & State
Zip / Country

3. Date Incorporated or Qualified
06/04/1993

4. FEI Number
65-0401938
☐ 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 owes the current year intangible Personal Property Tax ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NARCIANDI, FERNANDO M
12834 SW 119 TERR.
MIAMI FL 33186

10. Name and Address of New Registered Agent

Name: Narciandi Fernando
Street Address (P.O. Box Number is Not Acceptable): 12973 SW 112 St #135
City: Miami FL ST: FL Zip Code: 33186

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
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered agent signature required when submitting) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 TITLE	PD ☐ DELETE	1 TITLE	President ☒ Change ☐ Addition
1 NAME	NARCIANDI, FERNANDO M	1 NAME	Narciandi Fernando
1 STREET ADDRESS	12834 SW 119 TERR.	1 STREET ADDRESS	12973 SW 112 St #135
1 CITY-ST-ZIP	MIAMI FL	1 CITY-ST-ZIP	Miami FL 33186
2 TITLE	SD ☒ DELETE	2 TITLE	☐ Change ☐ Addition
2 NAME	PARDO, LUIS	2 NAME	
2 STREET ADDRESS	525 SLIPPER ROCK RD	2 STREET ADDRESS	
2 CITY-ST-ZIP	FT LAUDERDALE FL 33327	2 CITY-ST-ZIP	
3 TITLE	VPD ☒ DELETE	3 TITLE	☐ Change ☐ Addition
3 NAME	PARDO, TONY	3 NAME	
3 STREET ADDRESS	537 SLIPPERY ROCK RD	3 STREET ADDRESS	
3 CITY-ST-ZIP	FT LAUDERDALE FL 33327	3 CITY-ST-ZIP	
4 TITLE	☐ DELETE	4 TITLE	☐ Change ☐ Addition
4 NAME		4 NAME	
4 STREET ADDRESS		4 STREET ADDRESS	
4 CITY-ST-ZIP		4 CITY-ST-ZIP	
5 TITLE	☐ DELETE	5 TITLE	☐ Change ☐ Addition
5 NAME		5 NAME	
5 STREET ADDRESS		5 STREET ADDRESS	
5 CITY-ST-ZIP		5 CITY-ST-ZIP	
6 TITLE	☐ DELETE	6 TITLE	☐ Change ☐ Addition
6 NAME		6 NAME	
6 STREET ADDRESS		6 STREET ADDRESS	
6 CITY-ST-ZIP		6 CITY-ST-ZIP	

CR2E034 (11/98)

14. I/We 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 added above or on an attachment with an address, and/or I am otherwise empowered.

3/11/99 305 599 0433