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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham

Secretary of State | DIVISION OF COMPORATIONS

1996

DOCUMENT #

Principal Place of Business

P93000058811 (9)

Mailing Address

ROYAL RETIREMENT VILLA, INC.

FILED Apr 14 1996 8:00 am Secretary of State



1270 NE 112TH ST MIAMI FL 33161 US			1270 NE 1127H ST Miami Fl 33161 US			
					 Date Incorporated or Qualified 08/16/1993 	3a. Date of Last Report 04/17/1995
<u> </u>	nce of Business	2a. Mailing Addr	09S		4. FEI Number	Applied For
21	· ••••••••••••••••••••••••••••••••••••	26			65-0446218	Not Applicable
Suite, Apt. #, etc.		Suite Apt. #	Suite Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional
22		27	<u> </u>		5. Statuledie of Status Desired	Fee Required
City & State	•	City & State	City & State		6. Election Campaign Financing	55.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζφ	Count	ry	8. This corporation has liability for i	ntangible tax under s. 199.032,
24	[25]	29	30			□No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
İ			8	1 Name	•	
BODZIN	, martin i		82 Street Add		Address (P.O. Box Number is Not Acceptab	le)
621 NW	53RD ST		5005070		r source pro- Box remocrite rect receptary	(6)
STE 240)		83			
BOCA R	ATON FL 33487		84 City		72 - 134 - 13	
			18	4 City		FL 85 Zip Code
or registere	o the provisions of Sections 607 ed agent, or both, in the State of h, and accept the obligations of,	FEDUCAL OUGH CHARGE WAS	aumonzed by the co	named or poration	corporation submits this statement for the pur s hoard of directors. Thereby accept the appo	
SIGNATURE _	Signatine Type dicription to the lie of high state	of supervisor this have distant	divide to your year		feet when centioning	
12.		S AND DIRECTORS	I 13.	Pril Skipiarure	ADDITIONS/CHANCES TO OFFI	CEGO AND DIDECTORS IN 16
TITLE	PSD	□X 051.8		 F	BOOKMAN CHANA Y 1270 NE 112 ST	Change Addition
NAME	BOOKMAN, CHANA Y	 -	1.2 NAM		ROOKMAN STANNA Y	C Onange C Addition
STREET ADDRESS	1270 NE 112TH ST			L ET ADDRESS	12 YO NE 11257	
CITY-ST-ZIP	MIAMI FL		•		MIAMI FLA 33161	
TITLE	Man / L	☐ DELE	1.4 City TE 2.1 Till		PILAMI FLA 33161	
NAME						Change Addition
STREET ADDRESS			2.2 NAM			Í
				E1 ADDRESS		
CITY-ST-ZIP TITLE		Flores	2 4 CITY			
(☐ DELE				Change 🔲 Addition
NAME			3.2 NAM			1
STREET ADDRESS			33 STRI	ET ADDRESS		1
CITY - ST - ZIP			3.4 CifY	-ST - 71F		
TITLE		☐ DELE	1E 4. 1 TITL			☐ Change ☐ Addition
NAME			4.2 NAM	:		
STREET ADDRESS			43 STRE	ET ADDRESS	1	
CITY - ST - ZIP			4.4 CITY	ST ZIP	1	
TITLE		DELE	TE 5.1 TITL			Criange Addition
NAME			5.2 NAMI			
STREET ADDRESS			5.3 STHE	EF ADDRESS		
CITY-ST-ZIP			5.4 GBY	S3-ZIP		
TITLE		DELE				Change Addition
NAME			6.2 NAM			-nea
STREET ADDRESS				ET ADDRESS	11	900
CITY-ST-ZIP			6.4 CiTY:		\$ DO by BO	111 4-14-96
	certify that the information supp	oled with this filing is volunta	arily furnished and do	es not qu	alify for the exemption stated a Section 1190	07(3)(k), 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 or on an attachment with an address

SIGNATURE: 4

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/96 305-895-4720