

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000022666

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: ROYAL PALM SHOPPING CENTER, INC.

## Current Principal Place of Business:

15043 SOUTH DIXIE HIGHWAY  
MIAMI, FL 33176

## New Principal Place of Business:

806 NORTH KROME AVENUE  
HOMESTEAD, FL 33030

## Current Mailing Address:

15043 SOUTH DIXIE HIGHWAY  
MIAMI, FL 33176

## New Mailing Address:

806 NORTH KROME AVENUE  
HOMESTEAD, FL 33030

FEI Number: 65-0490421

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHIFF, JAMES M  
9130 SOUTH DADELAND BLVD.  
STE. 1609  
MIAMI, FL 33156 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WARSHOFSKY, GERALD  
Address: 15043 SOUTH DIXIE HIGHWAY  
City-St-Zip: MIAMI, FL 33176

Title: VSD ( ) Delete  
Name: SMITH, ORIN B  
Address: 15043 SOUTH DIXIE HIGHWAY  
City-St-Zip: MIAMI, FL 33176

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WARSHOFSKY, GERALD  
Address: 806 NORTH KROME AVENUE  
City-St-Zip: HOMESTEAD, FL 33030

Title: VSD (X) Change ( ) Addition  
Name: SMITH, ORIN B  
Address: 806 NORTH KROME AVENUE  
City-St-Zip: HOMESTEAD, FL 33030

Title: VSD ( ) Change (X) Addition  
Name: WARSHOFSKY, DAVID  
Address: 806 NORTH KROME AVENUE  
City-St-Zip: HOMESTEAD, FL 33030

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARSHOFSKY, GERALD

PD

01/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date