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

CORPORATION ANNUAL REPORT



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

1996

DOCU	MENT # DO 400								
1. Corporation	i Name	0054022 (6)							
ROYAL	. PICTURES INC.								
Principa! Place	of Business	Mailing Address							
12100 N.E. 16 AVE.		12100 N.E. 16 AVE.							
S- 201		S- 201							
NORTH MIAI	WI FL 33161	NORTH MIAMI FL 33161			3. Date Incorporated or Qualifie	I	ate of Last F		
					07/19/1994	<u> </u>	<u>06/23/19</u>		
	ace of Business	2a. Mailing Address			4. FEI Number		ļ <b></b>	Applied For Not Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.			65-0511907			5 Additional	
22	w, etc.	27			5. Certificate of Status Desired			Required	
City & State	9	City & State			6. Election Campaign Financing	6. Election Campaign Financing \$5.00 May Be			
23	23		<u></u>		Trust Fund Contribution				
Zip	Country	Zφ	Country			corporation has liability for intangible tax under s. 199.032,		, 199.032,	
24	[25] [29] [30]		30			Florida Statutes			
	9. Name and Address of Currer	nt Registereo Agent	81	Name	It. Name and Address of Nev	rnegistere	a Agent		
200	20000		82						
BRENT, ROBERT				Street /	Address (P.O. Box Number is Not Accep	table)			
12100 N.E. 16 AVE. S- 201									
NORTH MIAMI FL 33161							71 -7		
NONIII	MICHIEL COTO		84	City		F	L  85   Z	ip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508 Florida Statutes	, the above r	named co	orporation submits this statement for the board of directors. Thereby accept the a	purpose of c	hanging its	registered office	
or register familiar wi	red agent, or both, in the State of Fight ith, and accept the obligations of, Sec.	oa: Such change was admorzed bon 607.0505, Florida Statutes.	rby the corp	ORAHOLIS	pourd of directors. Thereby accept the a	ррозилен	as registere	u agent. Fam	
SIGNATURE									
12.	Signature is test or protect date of registered ages  OF LICERS AN	ta attischan) date itellie. D DIRECTORS	facjetes vi Ager	1 8-9 131 76 1	request when remaining  ADDITIONS/CHANGES TO C	DATE FEICERS AI	ND DIRECTO	ORS IN 12	
TITLE			1 1 THL :			Change	Addit.on		
NAME	BRENT, ROBERT		1.2 NAM :				^		
STREET ADDRESS	615 NE 8TH STREET		1.3 STREET	ADDRESS	1210011 & ILAUC, S.	ع: <b>بو ع</b> ة	> <b>\</b>		
CITY-ST-ZIP			14 City S	1 - 216	North Miam. F	dorth Miam. FL 33161			
TIFLE			2 1 1115				☐ Change	ncitibbA 🔲	
NAME	OLINSKY, DAVID								
STREET ADDRESS	3391 N. 40TH ST.	<b>1</b> -		AUORESS					
CITY - ST - ZIP	HOLLYWOOD FL 33021	FTI OUT FIG	2.4 City -S	1 - ZIP				FT sauti	
TITLE		DELETE	3 1 11111				Change	Addition Addition	
NAME			3.2 NAM :	r amoneces					
STREET ADDRESS			3.3 STRIE						
CITY - ST - Z:P		[] DELETE	3.4 CHY S	01 - ZUF			☐ Change	Addition	
NAME		td	4.2 NAM						
STREET ADDRESS			4.3 STREET	AODRESS					
CITY-S!-ZIP			4.4 C'TY - S						
117LE		☐ DELETE	5 1 TITL				Change	Addition	
NAME			5.2 NAM :						
STREET ADDRESS			53 STREET	ADDRESS					
CITY - ST - ZIP	<del> </del>	Par - F - c	5.4 GITY - S	51 ZIP			<b>[</b> ] (*****	Andrew Co.	
TOTLE		DELETE	6 1 H/L4		İ		Change	Addition	

64 CITY-ST-ZIP

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is rule 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 en powered 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.

6.2 N4M :

6.3 STREET ADDRESS

SIGNATURE: ....

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PROS. 41-15-46 (305) 6(13.1440

CR2E034 (12/95)