

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000066346

1. Entity Name

ROYAL BUILDERS, INC.

Principal Place of Business

2594 W 84 ST  
HIALEAH FL 33016  
US

Mailing Address

2594 W 84 ST  
HIALEAH FL 33016  
US

2. Principal Place of Business

16501 N.W. 84 AVE

3. Mailing Address

16501 N.W. 84 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI LAKES, FL.

City & State

MIAMI LAKES, FL.

Zip

33016

Country

USA

Zip

33016

Country

USA

4. FEI Number

65-0519562

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CAMPANO, GASTON  
2594 W 84 ST  
HIALEAH FL 33016

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEB 14, 2001

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PT  
NAME GASTON, CAMPANO ☐ Delete  
STREET ADDRESS 2594 W 84 ST  
CITY-ST-ZIP HIALEAH FL 33016

TITLE VS  
NAME CAMPANO, ANTHONY ☒ Delete  
STREET ADDRESS 11584 NW 39 ST  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTVS  
NAME GASTON CAMPANO ☐ Change ☒ Addition  
STREET ADDRESS 16501 N.W. 84 AVE.  
CITY-ST-ZIP MIAMI LAKES, FL 33016

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

GASTON CAMPANO

FEB 14, 2001 (305) 826-7403



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)