

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000074362

FILED
Dec 19, 2004
Secretary of State

Entity Name: THE ROYAL COMPANY FOR LIFE & HEALTH INSURANCE, INC.

Current Principal Place of Business:

6161 BLUE LAGOON DR
STE 360
MIAMI, FL 33126 US

New Principal Place of Business:

299 ALHAMBRA CIRCLE
SUITE 501
CORAL GABLES, FL 33134 US

Current Mailing Address:

6161 BLUE LAGOON DR
STE 360
MIAMI, FL 33126 US

New Mailing Address:

299 ALHAMBRA CIRCLE
SUITE 501
CORAL GABLES, FL 33134 US

FEI Number: 65-0551158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORTES, FERNANDO SR
6161 BLUE LAGOON DR
STE 360
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

CORTES, FERNANDO SR
299 ALHAMBRA CIRCLE
SUITE 501
CORAL GABLES, FL 33134 US

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: FERNANDO CORTES, SR.

12/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: CORTES, FERNANDO SR.
Address: 6161 BLUE LAGOON DR #360
City-St-Zip: MIAMI, FL 33126

Title: ST () Delete
Name: CORTES, FERNANDO JR.
Address: 6161 BLUE LAGOON DR #360
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: CORTES, FERNANDO SR.
Address: 299 ALHAMBRA CIRCLE, SUITE 501
City-St-Zip: CORAL GABLES, FL 33134

Title: ST (X) Change () Addition
Name: CORTES, FERNANDO JR.
Address: 299 ALHAMBRA CIRCLE, SUITE 501
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FERNANDO CORTES, JR.

ST

12/19/2004

Electronic Signature of Signing Officer or Director

Date