

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000081935 (6)

1. Corporation Name
ROYAL EXPORT, INC.



Principal Place of Business 889 PINECREST DRIVE MIAMI SPRINGS FL 33166 US	Mailing Address P O BOX 660386 MIAMI SPRINGS FL 33266-0386 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/08/1994	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number 65-0533524	Applied For <input type="checkbox"/> Not Applicable
22 City & State	27	29 City & State	30	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**PARRALES, GENITH
889 PINECREST DRIVE
MIAMI SPRINGS FL 33266**

10. Name and Address of New Registered Agent

81 Name PARRALES, JOSEPH F
82 Street Address (P.O. Box Number is Not Acceptable) 889 PINECREST DR.
83
84 City MIAMI SPRINGS FL 85 Zip Code 33166

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Joseph F. Parrales

(NOTE: Registered Agent signature required when reinstating)

3/30/98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	
NAME	PARRALES, JULIO F	12 NAME	
STREET ADDRESS	889 PINCREST DRIVE	13 STREET ADDRESS	
CITY-ST-ZIP	MIAMI SPRINGS FL	14 CITY-ST-ZIP	
TITLE	DVP	21 TITLE	VP
NAME	PARRALES, JOHNNY A	22 NAME	PARRALES, JOSEPH F.
STREET ADDRESS	889 PINECREST DRIVE	23 STREET ADDRESS	889 PINECREST DR.
CITY-ST-ZIP	MIAMI SPRINGS FL	24 CITY-ST-ZIP	MIAMI SPRINGS, FL 33166
TITLE	DT	31 TITLE	
NAME	PARRALES, GENITH	32 NAME	
STREET ADDRESS	889 PINECREST DRIVE	33 STREET ADDRESS	
CITY-ST-ZIP	MIAMI SPRINGS FL	34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE

Julio F. Parrales

APR 16/98

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CR2E034 (10/97)