

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
 04-30-2001 90023 015 ***150.00

0133014

DOCUMENT # P95000005158

1. Entity Name

MIL ROYAL CAPITAL, N.A., INC.

Principal Place of Business

Mailing Address

~~5346 NW 37 WAY~~
~~CORAL SPGS FL 33067~~
 US

5446 NW 37 WAY
CORAL SPGS FL 33067
 US

2. Principal Place of Business

10358 Copper Lake Drive
 Suite, Apt. #, etc.

3. Mailing Address

10358 Copper Lake Drive
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Boynton Beach, FL

City & State
Boynton Beach, FL

4. FEI Number **65-0552273**

Applied For
 Not Applicable

Zip
33437

Country

Zip
33437

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

STITSKY, EDITH D
5446 NW 37 WAY
CORAL SPGS FL 33067

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
10358 Copper Lake Drive
 City
Boynton Beach **FL** Zip Code
33437

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
D ☐ Delete
 NAME
STITSKY, EDITH D
 STREET ADDRESS
~~5446 NW 37 WAY~~
 CITY-ST-ZIP
~~CORAL SPRINGS FL 33067~~

TITLE
☒ Change ☐ Addition
 NAME
10358 Copper Lake Drive
 STREET ADDRESS
Boynton Beach, FL 33437
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

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

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: **Edith Donna Stitsky** **Edith Donna Stitsky** 4/24/01 561-742-7807
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)