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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000054604 (0)

ROYCO, Inc.

FILED
Sep 17 1997 8:00am
Secretary of State

Principal Pla	ce of Business	Mailing Address					
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830 NW 57th Court 830 NW 57th Court Ft Lauderdale FL 33309 Ft Lauderdale FL 33309						*	
гсьа	uderdate rL 33309	ft Lauder	dare Fr	33309	3. Date Incorporated or Qualified	3a. Date of Last	Report
					07/11/1995	04709	971996
<u> </u>	Place of Business	2s. Mailing Addres			4. FEt Number		oplied For
21 19665 Oakbrook Court 26 19665 Oakb				Court	65-0648242	N	lot Applicable
Suite, Apt	i. #, elc.	Suite, Apt. #, et	C.		5. Certificate of Status Desired	4 1	Additional
City & Sta	14	City & State		······································	1 2	Fee P	lequired
23		—	aton FL		Election Campaign Financing Trust Fund Contribution		May Be to Fees
- Hoca	Raton FI Country	Zip	Countr	ry	B. This corporation has liability for in		
24 22122	25 TICA	29 33/33	30 119	SA		Yes No	s. 188.002,
33433	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	Istered Agent	
Landi	s, Daniel M Esqui	re	81	Name Ri	cki Robinson		
090 North Fodoval Highway 182 Street Address (P.O. Box Number is Not Acceptable)							
Suite 302					70 OAKBROOK CT	· - <u>—</u>	
	Raton FL 33432		183)			
			84		12 o		Code
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida	Statutes, the abov	BOCA	t RATON poration submits this statement for the pu	IFF 33	434
V office or I	registered agent, or both, in the State of	of Florida, Such change	was authorized b	y the corporati	oration submits this statement for the puion's board of directors. I hereby accept	t the appointment as	registered
SIGNATURE/		(JO, I IOITGA GIALULE				
	Signature, typed or printed name of registered agen		(NOTE: Registered Ag	gent signature require	ed when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE		☐ DELE1	E 1.1 TITLE			Channe	RS IN 12 Addition
TITLE NAME	Director/Presid	☐ DELE1	E 1.1 TITLE 1.2 NAME	ا ا د	Director/Vice-Pres	Channe	
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To hereby certify that the mormation supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Floriner 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; the lam 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

BIGHATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

6/30/97

H8780558B