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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000057677 (3)

ROYAL PRESTIGE SILVER WORLD, INC.

Mailing Address Principal Place of Business 6851 S.W. 15TH ST. 6851 S.W. 15TH ST. MIAMI FL 33144-5574 MIAMI FL 33144-5574 3. Date Incorporated or Qualified 3a. Date of Last Report 04/29/1996 07/26/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0618785 21 26 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes \(\sigma\) No Country Zip Country Zφ 30 29 24 25 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 Name SAAVEDRA, JULIO 6851 S.W. 15TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33144-5574 83 City 84 Zip Code 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 Signature, Typodio: printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition PD DELETE 1.1100 THLE SAAVEDRA, JULIO NAME 1.2 NAME 6851 S.W. 15TH ST. 1.3 STREET ADORESS STREET ADDRESS MIAMI FL 33144-5574 CITY - ST - ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE SAAVEDRA, ELBA **2.2 NAME** NAME 6851 S.W. 15TH ST. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33144-5574 CHY+S1-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TILLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHEY-ST-ZIE Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - \$1 - 20P DELETE Change Addition 5.1 TITLE THEF 5.2 NAME MALIE 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-S1-ZIF Change Addition DELETE

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do hereby certily 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 seport 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 of 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.

TITLE

NAME

STREET ADDRESS.

Daytime Phone #

(96/6) (6)

CR2E034

FILED

Apr 16 1997 8:00am

Secretary of State