

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000063245

1. Entity Name

ROYAL PALM PLAZA PROPERTIES, INC.

FILED
Feb 21, 2000 8:00 am
Secretary of State

02-21-2000 90021 029 ***150.00

Principal Place of Business

Mailing Address

% AUERBACH ASSOCIATES, INC.
169 LINCOLN ROAD, #224
MIAMI BEACH FL 33139

% AUERBACH ASSOCIATES, INC.
169 LINCOLN ROAD, #224
MIAMI BEACH FL 33140-3448



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

c/o Auerbach Associates, Inc.

c/o Auerbach Associates, Inc.

Suite, Apt. #, etc.

763 W 41 Street, Suite A

Suite, Apt. #, etc.

763 W 41 Street, Suite A

City & State

Miami Beach, FL

City & State

Miami Beach, FL

4. FEI Number

65-0610143

Applied For

Not Applicable

Zip

33140

Country

USA

Zip

33140

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AUERBACH, STUART
% AUERBACH ASSOCIATES, INC.
169 LINCOLN ROAD, #224
MIAMI BEACH FL 33139

Name

Street Address (P.O. Box Number is Not Acceptable)

763 W 41 Street, Suite A

City

Miami Beach

FL

Zip Code
33140

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, 2000 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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DABBY, FRANK
515 LORING AVE
LOS ANGELES CA ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: BY:

Frank Dabby
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK DABBY, PRESIDENT

1/30/2000

305-672-0492

Date

Daytime Phone #