## 2002 UNIFORM BUSINESS REPORT (UBR) P95000084802 **DOCUMENT #** 1. Entity Name ROYAL TRADING CORP. Principal Place of Business Mailing Address C/O LANGEN & LANGEN P.A. P.O. BOX 398570 112 SOUTH HIBISCUS DRIVE MIAMI BEACH FL 33239-8570 MIAMI FL 33139 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number NOT APPLICABLE

## **FILED** May 03, 2002 8:00 am Secretary of State

05-03-2002 90016 034 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For

						HOT ALLEOAL	/LL	Not Applicable
Zip	Country		Zíp	Country	5.	Certificate of Status Desired [	\$8.75 Fee Requ	Additional
	6. Name and Address	of Current Regi	stered Agent		7.~	Name and Address of New Regis		
LANGEN	CHRISTOPHED			Name				
LANGEN, CHRISTOPHER 112 SOUTH HIBISCUS DRIVE					Street Address (P.O. Box Number is Not Acceptable)			
MIAMI BE	ACH FL 33139				1.4	-		<del></del>
·-				City			FL Zip C	ode
8. The above	e named entity submits this st	atement for the	purpose of changing its r	egistered office or	registered ag	gent, or both, in the State of Florida.		
SIGNATURE	Signature, typed or printed name of reg	sistered agent and title	if anninghie (NOTE)	Bogistarad Assat sizzat			<u>.                                    </u>	
	<u> </u>			Registered Agent signatu		einstating)	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, 2002 Fee will be \$550.00 Make Check Payable to Department of State		50.00	10. Election Campaign Financir Trust Fund Contribution.	Ψυ	.00 May Be ded to Fees
11.	OFFIC	ERS AND DIRE		12.		L DITIONS/CHANGES TO OFFICER	C AND DIDEOTO	200 11144
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of the corn	ertify that the information sup on this report or supplementa oration or the receiver or trus or on an attachment with an a	tee emnowered	o execute this report on	e exemption state signature shall hav required by Chap	d in Section 1 re the same le ter 607, Florid	19.07(3)(i), Florida Statutes. I furthe egal effect as if made under oath; ti la Statutes; and that my name appe	er certify that the nat I am an office ears in Block 11 o	information er or director or Block 12 if

SIGNATURE:

4-15-02