FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 14, 2002 8:00 am Secretary of State P96000002651 DOCUMENT # 1. Entity Name 02-14-2002 90077 018 ***150.00 REGAL FINANCIAL SERVICES, INC. Principal Place of Business Mailing Address 4250 INGRAHAM HIGHWAY 4250 INGRAHAM HIGHWAY MIAMI FL 33133-6718 MIAMI FL 33133-6718 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0645420 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BLANCO, ALFREDO JR Street Address (P.O. Box Number is Not Acceptable) 4250 INGRAHAM HIGHWAY MIAMI FL 33133-6718 Zip Code City FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition[®] TITLE ... Delete TITLE BLANCO, ALFREDO JR NAME NAME **4250 INGRAHAM HIGHWAY** STREET ADDRESS STREET ADDRESS MIAMI FL 33133-6718 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BLANCO, LIANA M NAME 4250 INGRAHAM HIGHWAY STREET ADDRESS STREET ADDRESS MIAMI FL 33133-6718 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change . Addition. TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

changed, or on an attachment with an address, with all other like empowered (305)666-9025 Alfredo BLANCO, JR. - PTD - January 28, 2002 -

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