

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *PA000006368*

1. Corporation Name
THE ROYALTY GROUP, INC.

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
9750 SW 66th Street 9750 SW 66th Street
Miami, FL 33173 Miami, FL 33173

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida

8/13/1996

5. FEI Number

65-0707217

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
<i>P</i>	<i>Todd S. Murray</i>	<i>9750 SW 66 St.</i>	<i>Miami, FL 33173</i>
<i>S</i>	<i>EVA L. Rodriguez</i>	<i>117 SW 126 Pl.</i>	<i>Miami, FL 33184</i>
<i>V</i>	<i>George De Cardenas</i>	<i>10875 SW 112 Ave -11505</i>	<i>Miami, FL 33176</i>
<i>T</i>	<i>Marivel Murray</i>	<i>9750 SW 66 St.</i>	<i>Miami, FL 33173</i>
<i>M</i>	<i>Juan Espinal</i>	<i>13720 SW 20th St.</i>	<i>Miami, FL 33032</i>

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900.00

8. Name and Address of Current Registered Agent

Murray, Todd
9750 SW 66th Street
Miami, FL 33173

9. Name and Address of New or Former Agent

Name

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

Suite, Apt. #, Etc.

City

State Zip Code
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/99 (25) 234546
Date Daytime Phone *

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