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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000096225 (3) ROYAL HORSE DRAWN CARRIAGES, INC. Principal Place of Business Mailing Address 2205 S CYPRESS BEND 2205 S CYPRESS BEND BLDG. 8 #602 BLDG. 8 #602 POMPANO BEACH FL 33069 POMPANO BEACH FL 33069-5638 3. Date Incorporated or Qualified 3a, Date of Last Report 11/20/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. S8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes No 25 29 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name WETZEL, JAMES 2205 S. CYPRESS BEND Street Address (P.O. Box Number is Not Acceptable) BLDG. 8 #602 POMPANO BEACH FL 33069-26 83 64 City 85 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. Lem tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. Segmentino, typed or printed name of registered agent and title if applicable INOTE: Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)DELETE Addition HILE Change 1.1 TITLE VERGIS, WILLIAM NAME 1.2 NAME 2000 HIATUS ROAD -STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL 33026 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2:1 TITLE Change Addition WETZEL, JAMES NAME 2.2 NAME 2205 S CYPRESS BEND, BLDG 8 #602 STREET ACORESS 2.3 STREET ADDRESS POMPANO BEACH FL 33069 CITY - \$1 - 212 2. 4 CITY-ST-ZIP TIT;E DELETE Change ☐ Addition 3.1.31TLE NAM? 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS C(1Y - 51 - 20 3.4. CITY - ST - ZIP DELETE THE 4 1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY - ST- ZH 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5 2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY - \$1 - 76 5.4 CITY-ST-ZIP DELETE Change ☐ Addition 111.5 6.1 TITLE NAM: 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do horoby certify that the information supplied with this filling 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 report 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 office or of into 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 of Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY - ST - ZII

JAMES WETZEL

3-19-97 971-9

FILED

Apr 23 1997 8:00am

Secretary of State