


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P96000096593

1. Entity Name
ROYAL DUTCH CORPORATION



Principal Place of Business Mailing Address

3353 GALT OCEAN DRIVE **3353 GALT OCEAN DRIVE**
FORT LAUDERDALE, FL 33308 US **FORT LAUDERDALE, FL 33308 US**



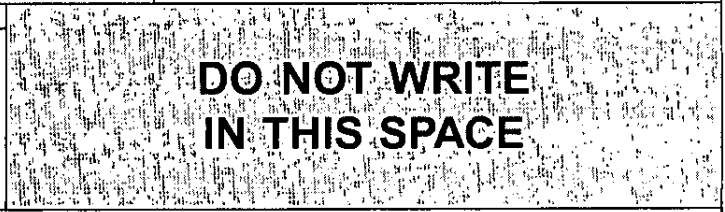
02202008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0714962 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SCHROEDERS, B. PAUL
3353 GALT OCEAN DRIVE
FORT LAUDERDALE, FL 33308



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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PDT
NAME	SCHROEDERS, JON PAUL
STREET ADDRESS	3353 GALT OCEAN DRIVE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	VSD
NAME	SCHROEDERS, LUCY E
STREET ADDRESS	3353 GALT OCEAN DRIVE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	



12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* *[Signature]* *02/28/08 9545655437*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #