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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 1. Corporation Name P96000099127 (8)

ROYAL APPRAISAL SERVICES, INC.

## **FILED** Jan 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									- I HEBUIREN 718 DRUIR BRINL BRINL BRINL BRUIR BRUIR BRINE HEIGH HEIGH HIBIR HIBIN HERV HERV	
144 ELYSIUM DR ROYAL PALM BEACH FL 33411					144 ELYSIUM DR ROYAL PALM BEACH FL 33411					DO NOT WRITE IN THIS SPACE
										3. Date Incorporated or Qualified 01/01/1997
2. Principal Place of Business					2a. Mailing Address					4. FEI Number Applied For
21					26 1128 ROYAL PALM			BE	EACH BLUE	65-0717970 Not Applicable
Sulte, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
22					27 Suite 344 City & State					Fee Required
City & State									<del>-</del> ,	6. Election Campaign Financing \$5.00 May Be
Zip Cou				28	<u> Κογηι</u> Ζφ	PALM	Con. R≝≫CH		と	Trust Fund Contribution LJ Added to Fees
24	2	<b>-</b>	,	29	33411		1	•	A	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No
27.1		ss of Curren				1001		<u> </u>	10. Name and Address of New Registered Agent	
MOBILIA, RONALD L 81 Name										
	4 ELYSIUM [						-	82 Street Address (P.O. Box Number is Not Acceptable)		
ROYAL PALM BEACH FL 33411								92	Street Addre	ess (F.O. Box Norticel is Not Acceptable)
							[	83		
								B4	City	85 Zip Code
							ľ		Oity	FL   s   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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Hag								Ager	nt signature require	od when reinstating) DATE
12.	10		FFICERS AND	) DIREC		DELETE	13.	_	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TATLE	PRESIDEN	ii n	CBILLA		البا	DECETE	1.1 1/10			Change LI Addition
NAME	144 Er		DRIVE				1.2 NAM		IEDOCO.	
STREET ADDRESS	ROYAL			C1	33011				ADDRESS	
CITY-ST-ZIP TITLE	SECRET		DENCH	. 1 -		DELETE	1.4 CiT		- 2117	☐ Change ☐ Addition
NAME	JANICE	W. W	ALLINO			22.2.4	2.2 NAM			
STREET ADDRESS	144 EV	HEIUM	DRIVE						ADDRESS	
CITY-ST-ZIP	ROTAL		BEACH	(C)	1 22411	ı	2 4 CIT			
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TITLE					∐ :	ELETE	6.1 TiTL			☐ Change ☐ Addition
NAME							6.2 NAM		İ	
STREET ADDRESS							6.3 STR	EET #	ADDRESS	
CITY-ST-ZIP			a a sawada s		e		6.4 C(T)	/- ST		Continue 110 D7/2V/A Elevida Ciptutas I further codiffu that the information

I hereby 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 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 12 or Block 13 if changed, or on an attachment with an address.