

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

FILED  
May 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000022278 (0)  
1. Corporation Name  
ROYALE MEDICAL-LEGAL NURSE CONSULTANTS, INC.



Principal Place of Business

18411 NW 24TH AVENUE  
MIAMI FL 33056-3242

Mailing Address

18411 NW 24TH AVENUE  
MIAMI FL 33056-3242

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/05/1997

4. FEI Number

Applied For  
☒ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

KING, YVONNE  
18411 NW 24TH AVENUE  
MIAMI FL 33056-3242

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent and the corporation

(NOT: Registered Agent signature required when reinstating)

4/29/98

12. OFFICERS AND DIRECTORS

TITLE  
NAME KING, YVONNE  
STREET ADDRESS 18411 NW 24TH AVENUE  
CITY-ST-ZIP MIAMI FL 33056-3242

TITLE  
NAME BONITTO, ESMIE  
STREET ADDRESS 192 NE 124TH STREET  
CITY-ST-ZIP MIAMI FL 33161

TITLE  
NAME RAMSINGH, ANGELA  
STREET ADDRESS 192 NE 124TH STREET  
CITY-ST-ZIP MIAMI FL 33161

TITLE  
NAME PRICE, ROSE  
STREET ADDRESS 7817 WEST MERIDIAN STREET  
CITY-ST-ZIP MIRAMAR FL 33023

TITLE  
NAME WILLIAMS, WYRLENE  
STREET ADDRESS 2417 NW 43RD STREET  
CITY-ST-ZIP MIAMI FL 33142-4547

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 its 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.

CR2E034 (10/97)