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

P97000059979 (9)

VILLA ROYAL, INC.

FILED Apr 29 1998 8:00am Secretary of State



· 						<u>-</u>		ieri irii irii	
Principal Place of Business Mailing Address									
162 ALCAZAR		162 ALCAZAR STREET							
ROYAL PALM BEACH FL 33411		ROYAL PALM BEACH FL 33411				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						07/09/1997			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	×	Applied For	
21		26				65.0790372		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22		27				Fee Required			
City & State		City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Z ip	Country	Ζφ	Cou	ntry		8. This corporation owes or has paid the cur			
24	25	29	30				Yes	∐ No	
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered	Agent		
MA zzo la, vincent jr				81	Name				
	2 ALCAZAR STREET			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
RO	YAL PALM BEACH FL 33411								
				83					
				84	City		85 Z	ip Code	
						FL	. * *	`]	
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									
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board or directors. Findredly accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
Signature typind or printed name of registated agest and titled applicable (NOTE: Registered Agent signature regurded when re-installing) DATE									
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	Chang		
TITLE	D	☐ DELET E	1.1 TI				L.J Chang	le 🗀 YOURON]	
NAME	MAZZOLA, VINCENT JR		1.2 N/						
STREET ADDRESS	162 ALCAZAR STREET	144	. 1.3 STREET ADDRESS						
CITY-\$T-ZIP					iT-ZIP		Chang	e Addition	
TITLE	[_] DELETE		- 1	2.1 TITLE			chang	le C Audition	
NAME			2.2 N/						
STREET ADDRESS			2.3 STREET ADDRE						
CITY-ST-ZIP			2.4 CITY-ST-ZIP				-12	The state of	
TITLE		☐ DELETE	3.1 TO				Chang	je 🔲 Addition	
NAME			3.2 N/						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					ST-ZIP		-		
TITLE		☐ DELETE	4.1 TO	TLE			Chang	je 🔲 Addition	
NAME			4. 2 N	AME					
STREET ADDRESS			4.3 ST	REE1	ADDRESS				
CITY-ST-ZIP			4.4 01		T-ZIP		1 2		
TITLE		☐ DELE te	5.1 7	TLE				je 🔲 Addition	
NAME			5.2 N/	AME					
STREET ADDRESS			5.3 \$1	IREET	ADDRESS				
CITY-ST-ZIP			540	TY-S	ST - ZIP				
TITLE		☐ DELETE	61 TI	TLE			Chang	je 🔲 Addition	
NAME			6.2 N/	AME					
STREET ADDRESS			6.3 \$1	TREET	ADDRESS			ļ	
CITY-ST-ZIP			6.4 0	TY-S	ST-ZIP				
	posting that the information countied a	with this films does not qualify	for the eve	mn	tion stated in	Section 119.07(3)(i), Florida Statutes, Liurther ce	atify that	the information	

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 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.

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