2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000067860

Entity Name: ROYAL PALM FINE CARS, INC.

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
5895 S. KANNER HWY. STUART, FL 34997 US				2216 SE INDIAN STREET STUART, FL 34997 US		
Current Mailing Address:			New Mailir	New Mailing Address:		
5895 S. KANNER HWY STUART, FL 34997 US				2216 SE INDIAN STREET STUART, FL 34997 US		
FEI Number: 65-0770181 FEI Number Applied For() FEI Nu		El Number Not Appli	mber Not Applicable () Certificate of Status Desired ()			
Name and	Address of Co	urrent Registered Agent:	Name and	Address of New Re	gistered Agent:	
DANIA, FL	ERAL HWY 33004 US named entity s	ubmits this statement for the purp	ose of changing it	s registered office or	registered agent, or both,	
SIGNATUR						
01011/11011		c Signature of Registered Agent			Date	
Election Cam	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () CONSENTINO, A 341 SW TIMBER STUART, FL 349	RTRAIL	Title: Name: Address: City-St-Zip:	()Change	() Addition	
Title: Name: Address: City-St-Zip:	VTSD () CONSENTINO, A 341 SW TIMBER STUART, FL 34:	RTRAIL	Title: Name: Address: City-St-Zip:	()Change	() Addition	
Title: Name: Address: City-St-Zip:	D () ADAMS, GERAL 113 N. FEDERAI VANIA BEACH, F	L HIGHWAY	Title: Name: Address: City-St-Zip:	D (X) Change CONSENTINO, AMY 341 SW TIMBER TRAIL STUART, FL 34997	() Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	T () Change CONSENTINO, AMY 341 SW TIMBER TRAIL STUART, FL 34997	(X) Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	S () Change CONSENTINO, ROBERT 341 SW TIMBER TRAIL STUART, FL 34997	(X) Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () Change CONSENTINO, AMY 341 SW TIMBER TRAIL STUART, FL 34997	(X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMY CONSENTINO O/D 03/04/2009