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**

P97000095810 (2) DOCUMENT #

ROYAL SWEETS OF ORLANDO, INC.

Principal Place of Business	Mailing Address	
370 EAST S.R. 434 WINTER SPRINGS FL 32708	370 EAST S.R. 434 WINTER SPRINGS FL 32708	
2. Principal Place of Business	2a. Mailing Address	

Secretary of State

FILED

Jan 27 1998 8:00am



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/07/1997 Applied For 4. FEI Number Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name CORPORATION SERVICE COMPANY EELAM HGGARWA 1201 HAYS STREET 82 O. Box Number is Not Acceptable TALLAHASSEE FL 32301-2525 MUETONE 83 84 Zip Code **3** ユーフライ City 1 Gwoo 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. .eelam RESI BENT **SIGNATURE** Signature, typed or printed name of register d when reinstating) 12. OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELFTE D 1.1 TITLE Change Addition AGGARWAL, NEELAM APRANA NAME 1.2 NAME 1056 EDMISTON PLACE STREET ADDRESS 1.3 STREET ADDRESS LONGWOOD FL 32779 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change 2.1.1ITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELFTE TITLE 3.1 TITLE ☐ Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY- ST- ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CITY-ST-ZIP 5.4 CITY - ST - ZIP 000024134 TITLE DELETE 6.1 TITLE Addition -01/27/98---01080---027 NAME 6.2 NAME ***150.00 STREET ADDRESS 6.3 STREET ADDRESS 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 the receiver or trustoe 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.

6.4 CITY - ST - 7IP