

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90070 016 \*\*\*158.75

DOCUMENT # P99000002273

1. Entity Name

ROYAL RAILING CORP.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

12000 MOSS RANCH ROAD

3. Mailing Address

12000 MOSS RANCH ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL. 33156

City & State

MIAMI, FL. 33156

Zip

33156

Country

Zip

33156

Country

4. FEI Number

65-0886256

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
- Fee Required -

7. Name and Address of Current Registered Agent

Name

SUAREZ, FERNANDO

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

12000 MOSS RANCH ROAD

City

MIAMI

FL

Zip Code

33156

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

4-23-02

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D  
NAME SUAREZ, FERNANDO  
STREET ADDRESS 12000 MOSS RANCH ROAD  
CITY-ST-ZIP MIAMI, FL. 33156

TITLE D  
NAME DE PABLO, FRANCISCO  
STREET ADDRESS 12000 MOSS RANCH ROAD  
CITY-ST-ZIP MIAMI, FL. 33156

TITLE  
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**DO NOT WRITE  
IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-02

Date

Daytime Phone #