## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P99000016030**

1. Entity Name ROYAL FILLARD HOTEL, INC.

Principal Place of Business

ONE SOUTHEAST THIRD AVENUE

SUITE 2130 MIAMI, FL 33131 Mailing Address

ONE SOUTHEAST THIRD AVENUE SUITE 2130

MIAMI, FL 33131

FILED Apr 07, 2004 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

03182004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0903438 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COPROLITE CORPORATION ONE SOUTHEAST THIRD AVENUE SUITE 2130 MIAMI, FL 33131

## DO NOT WRITE IN THIS SPACE

WIAWI, PE 33131			IN THIS STACE		
8. The above the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and file:	I spolicable (NOTE Registered &c	nant alanetus	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.08  9. Election Campaign Finar  Trust Fund Contribution.				\$5.00 May Be Added to Fees	<u>000000105999</u> 04/07/04-80049-005 150.00
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MIAMI, FL 33131	OUTHEAST THIRD AVENUE, SUITE 2130			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS BLASS, STEPHEN A ONE SOUTHEAST THIRD AVENUE, SUITE 2130 MIAMI, FL 33131				
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO NOT WRITE	
Title Name Street address City-St-Zip				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					• •
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 path; that I am an officer or director					

Thereby certify that the information supplied with this titing does not quality for the exemption stated in Section 119.07(3)(i). Forlida Statutes, I further certify that the information indicated on this report or suppliemental report is pite 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 empreymend to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all-other like empowered.

SIGNATURE:

SIGNARGRE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR VICE PRESIDENT

12/04 377-9.