

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000027831

1. Entity Name

ROYAL BAY DEVELOPMENT, INC.

FILED
May 06, 2000 8:00 am
Secretary of State

05-06-2000 90184 001 ***450.00

12208

DO NOT WRITE IN THIS SPACE

Principal Place of Business
6605 Maynada
Coral Gables, FL 33146

Mailing Address
777 Brickell Avenue, Suite 900
Miami, Florida 33131

2. Principal Place of Business
1110 Brickell Avenue

3. Mailing Address
1200 Brickell Avenue

Suite, Apt. #, etc.

Suite 504

Suite 900

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number ☒ Applied For
Not Applicable

Zip Country Zip Country
33131 **33131**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

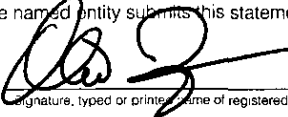
6. Name and Address of Current Registered Agent

Michael B. Walker
777 Brickell Avenue
Suite 900
Sun Trust Building
Miami, FL 33131

7. Name and Address of New Registered Agent

Name
AGIM Registered Agents, Inc.
Street Address (P.O. Box Number is Not Acceptable)
1200 Brickell Avenue, Suite 900
MAI
City **FL** Zip Code **33131**

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  **MARIO A. IGLESIAS**
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))

DATE

4/28/2000

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D			
	Robert F. Thorne			
	6605 Maynada			
	Coral Gables, FL 33146			

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	DPST			
	Robert F. Thorne			
	1100 Brickell Avenue, Suite 504			
	Miami, FL 33131			

CR2E034 (9/99)

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT F. THORNE

Date

4-27-00

Daytime Phone #

305 416 4800