

FILED

Jun 02, 2000 8:00 am
Secretary of State

06-02-2000 90004 018 ***150.00

CAPITAL CONNECTION 850 222 1222 04/25 '00 09:4
2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000088579
1. Entity Name
CORONA ROYALE, INC.

Principal Place of Business 1773 N.W. 79TH AVE.
MIAMI, FL 33126
Mailing Address 1773 N.W. 79TH AVE.
MIAMI, FL 33126

2. Principal Place of Business **3. Mailing Address**
City, Apt. #, etc. **City, Apt. #, etc.**
City & State **City & State**
Zip **Country** **Zip** **Country**

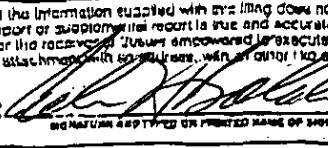
DO NOT WRITE IN THIS SPACE
4. FEI Number 65-0953513 **Applied for**
5. Certificate of Status Contract ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
TAYLOR, JAMES A. III
5070 N. HWY A1A, STE. 200
VERO BEACH, FL 32963
7. Name and Address of New Registered Agent
CALVIN H. BABCOCK
C/O THE BABCOCK COMPANY
1773 N.W. 79TH AVENUE
MIAMI FL 33126

8. The above named entity informs this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
SIGNATURE  **CALVIN H. BABCOCK** **4/28/00**
(Signature typed or printed name of registered agent and date of signature) (NOTE: Registered Agent signature is required when removing fee) DATE

9. This corporation is eligible to qualify its intangible tax filing requirement and elect to do so. ☐ **10. Election Campaign Financing Trust Fund Contribution.** ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BABCOCK, CALVIN H. 1773 N.W. 79TH AVE. MIAMI, FL 33126	☐ Delete	☐ Change ☐ Add/Rev
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COHEN, PAUL 1773 N.W. 79TH AVE. MIAMI, FL 33126	☐ Delete	☐ Change ☐ Add/Rev
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GARDNER, BARBARA 1773 N.W. 79TH AVE. MIAMI, FL 33126	☐ Delete	☐ Change ☐ Add/Rev
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Add/Rev
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Add/Rev
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Add/Rev

13. I hereby certify that the information supplied with this filing does not qualify for the exemption noted in Section 119.07(3)(b), Florida Statutes. I further certify that the information disclosed on this report or supplemental report is true and accurate and that my officers shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the registered agent 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 no changes, with an authorized signature.
SIGNATURE:  **CALVIN H. BABCOCK, PRES.** **4/28/00** **(305) 599-8811**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Mo/Yr