## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jul 18, 2000 8:00 am Secretary of State **DOCUMENT # V37836** 1. Entity Name ROYAL COAST CORPORATION 07-18-2000 90013 043 \*\*\*150.00 Principal Place of Business Mailing Address 17655 EAST SUNSHINE PARKWAY 17655 EAST SUNSHINE PARKWAY MIAMI FL 33169 **MIAMI FL 33169** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0338396 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent OGUNLADE, YOMI Street Address (P.O. Box Number is Not Acceptable) 17655 EAST SUNSHINE PARKWAY **MIAMI FL 33169** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rainstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Mln. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. D TITI F Change ☐ Addition TITLE ☐ Delete OGUNLADE, YOMI NAME NAME STREET ADDRESS STREET ADDRESS 17655 EAST SUNSHINE PKWY CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Change TITLE ☐ Delete TITI F OGUNLADE, MICHAELAS NAME STREET ADDRESS 17655 EAST SUNSHINE PKWY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Change Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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.

Attachment KOYAL COAST CORP. DH 137836 17655 E. Sunshinae PK: Miam, JC33169 Lorida Department of State July 10, 2000 Division of Corporation 1. O. Box 6327 Tallahassee, £232314
This Minform Busmess Report Felingtee.

To whom it may concern

In Reference to the Letter J. mailed to you doing Late 4 100 and early 5100 advising You that I did not secerce the Uniform business Report filing form, and your immediate action to this effect Shall be highly appreciated I did not receive the form and another thone Call was made to this effect.

Laves been experiencing some difficulties-with my mails bent taken to the breighbors, Some of which are brought Over and Some Still missing and no evidence of receipt from the Neighbors. Please bear with me in My effort to Obtain a mail Box any moment from brod! I Shall notify your office in stiling as Soon as possible when the mail box is obstamed. Enclose is the filing fee of \$15000

Affachment O# 137.836 DW 71408 in the envelop. regard Shall be highly appreciated. Thanks. Your Sincerely Your Ogunlade.