


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 13, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000096702
1. Entity Name
D'ROY GROUP, INC.



Principal Place of Business Mailing Address
3400 GULF BLVD P.O. BOX 67214
RONAY JEWELERS ST. PETERSBURG, FL 33736 US
ST. PETERSBURG, FL 33706 US



06062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
54-2127505 Not Applicable

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

6. Name and Address of Current Registered Agent

RONAY, ALFREDO J MR
5918 SKIMMER PT BLVD
GULFPORT, FL 33707

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES RONAY, ALFREDO J 5918 SKIMMER PT BLVD GULFPORT, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RONAY, MASHA 5918 SKIMMER PT BLVD GULFPORT, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000389533
06/13/05-80002-013 150.00

**DO NOT WRITE
IN THIS SPACE**

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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: A. J. Ronay Date: 06-09-05 Daytime Phone #: 727-384-4910
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR