


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 19, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 543521</b> 1. Entity Name ROYAL GREASE CORP.	
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<b>Principal Place of Business</b> 9401 NW 106TH ST STE 101 MEDLEY, FL 33178 US	<b>Mailing Address</b> 9401 NW 106TH ST STE 101 MEDLEY, FL 33178 US
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**DO NOT WRITE IN THIS SPACE**



03242006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1768369	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required

6. Name and Address of Current Registered Agent

ROBINSON JR, BARNETT ESQ  
120 E. PALMETTO PARK RD, STE 150  
BOCA RATON, FL 33432

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

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be</b> <b>Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACOBS, ELLEN LARGAY 9630 RIVERVIEW DR. SEBASTIAN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STDV LARGAY, CHARLES E JR 9401 NW 106TH ST, STE 102 MEDLEY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KNOWLES, JANET 9401 NW 106TH ST., STE 101 MEDLEY, FL 33178
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05/02/06-80093-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Janet Knowles / Janet Knowles 4-18-06 305-885-2451  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Assistant Secretary Daytime Phone #