

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

SEC. OF STATE
 DIVISION OF CORPORATE & STATE REGISTRATIONS
 06 FEB 20 AM 8:50

DOCUMENT # A25130 1. Entity Name ROYAL INDUSTRIAL INT'L LTD. PARTNERSHIP					
Principal Place of Business 675 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH, FL 33411			Mailing Address 675 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH, FL 33411		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02152006 Chg-LP CR2E003 (11/05)	
4. FEI Number 59-2408458				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JONES, ROBERT D. 590 ROYAL PALM BEACH BOULEVARD ROYAL PALM BEACH, FL 33411			Name CHRISTOPHER SANTAMARIA Street Address (P.O. Box Number is Not Acceptable) 675 ROYAL PALM BEACH BLVD City ROYAL PALM BEACH FL Zip Code 33411		
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 2/15/06	
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	SANTAMARIA, JESS R.		CITY-ST-ZIP		
STREET ADDRESS	255 PONDEROSA COURT				
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411				
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STREET ADDRESS					
CITY-ST-ZIP					
14. 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 is true and accurate, and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE:			DATE: 2/15/06		DAYTIME PHONE: 561-713-2350

STAPLE CHECK HERE