


2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By September 8, 2004

**FILED**  
**Jun 01, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # B02000000196</b> 1. Entry Name <b>ROYAL BATHS MANUFACTURING COMPANY, LTD.</b>	
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Principal Place of Business <b>14635 CHRISMAN ROAD HOUSTON, TX 77039</b>	Mailing Address <b>14635 CHRISMAN ROAD HOUSTON, TX 77039</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



05182004	Chg-LP	CR2E003 (10/03)
4. FEI Number <b>76-0211269</b>	Applied For Not Applied	
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent <b>CAPITOL CORPORATE SERVICES, INC. 1333 NORTH DUVAL STREET TALLAHASSEE, FL 32303</b>
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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.

9. Capital Contributions as Shown on record. <b>\$0.00</b>	10. Amount of Capital Contributions in FLORIDA to date.
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**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	<b>RBM-GP LLC</b>	CITY-ST-ZIP	
STREET ADDRESS	<b>14635 CHRISMAN ROAD</b>		
CITY-ST-ZIP	<b>HOUSTON, TX 32303</b>		
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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, the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE **GEORGE E. DAWSON** 5/19/04 281-227-453