

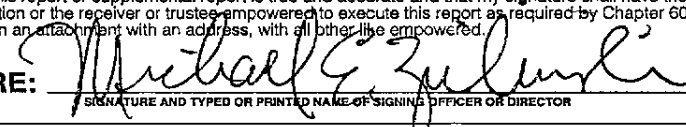


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 15, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F99000006317</b>			
1. Entity Name <b>ROYAL BUYING GROUP, INC.</b>			
Principal Place of Business <b>12 SALT CREEK LANE SUITE 450 HINSDALE, IL 60521 US</b>		Mailing Address <b>12 SALT CREEK LANE SUITE 450 HINSDALE, IL 60521 US</b>	
<b>DO NOT WRITE IN THIS SPACE</b>			
			
		07072004 No Chg-P CR2E034 (10/03)	
4. FEI Number <b>36-4028848</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
5. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
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) DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> 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	PD ZIELINSKI, MICHAEL E 18453 RIDGEWOOD AVE. LANSING, IL 60438		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GMEINER, MARTY 435 N. MADISON ST HINSDALE, IL 60521		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HILL, MARK 11 S. O12 MADISON BURR RIDGE, IL 60521		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RAZOWSKY, ROBERT 344 WOODLAND RD HIGHLAND PARK, IL 60035		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JUCKNISS, ROBERT 35 E. SANDPIPER LANE LAKE FOREST, IL 60045		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BUTTSLOFF, WILLIAM 1923 MISSION HILL LANE NORTHBROOK, IL 60062		
<b>DO NOT WRITE IN THIS SPACE</b>			
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: 		7-09-04 630-986-5416	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	