

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 07, 2005 8:00 am
Secretary of State

06-07-2005 90003 008 ***150.00



DOCUMENT # K64703
1. Entity Name
MAJESTIC CUSTOM HOMES & DEVELOPMENT, INC.

Principal Place of Business: **4061 ROYAL PALM BEACH BOULEVARD
ROYAL PALM BCH, FL 33411 US**
Mailing Address: **4061 ROYAL PALM BEACH BOULEVARD
ROYAL PALM BCH, FL 33411 US**

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.

City & State: Zip Country

Barcode
05162005 Chg-P CR2E034 (10/03)
4. FEI Number: **65-0097330** Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**GEORGE, JOHN P.
4061 ROYAL PALM BCH BLVD
ROYAL PALM BCH, FL 33411**

7. Name and Address of New Registered Agent
Name: Street Address (P.O. Box Number is Not Acceptable): City: **FL** Zip Code:

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 \$550.00
Due by September 7, 2005**

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

10. OFFICERS AND DIRECTORS

TITLE	PT	<input type="checkbox"/> Delete
NAME	GEORGE, JOHN P.	
STREET ADDRESS	2442 BAY VILLAGE CIRCLE	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410	
TITLE	D	<input type="checkbox"/> Delete
NAME	GEORGE, JOHN P.	
STREET ADDRESS	4061 ROYAL PALM BCH BLVD	
CITY-ST-ZIP	ROYAL PALM BCH, FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	ROY, GLENN	
STREET ADDRESS	102 WILD OATS CT	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	T	<input type="checkbox"/> Delete
NAME	LEVIS, BRAD	
STREET ADDRESS	700 HIBICUS DRIVE	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	HERNANDEZ-CRUZ, JORGE A	
STREET ADDRESS	4762 DAVIE RD	
CITY-ST-ZIP	LAKE WORTH, FL 33461	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: _____ **6/1/05** **561-790-2068**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #