2007 FOR PROFI ANNUAL	T CORPORA REPORT	TION	FILED Jan 08, 2007 8:00 am Secretary of State
DOCUMENT # K75525 1. Enlity Name ROYAL SPRINGS CORP.			01-08-2007 90249 008 ***158.75
Principal Place of Business ONE S.E. THIRD AVE. STE 3050 MIAMI, FL 33131 US	Mailing Address ONE S.E. THIRD AVE. STE 3050 MIAMI, FL 33131	US	I HANDAN DIK HEADD AND HIRD NEDD AND ANAN KIRAN ANAN KIRAN ANAN KIRAN ANAN ANAN ANAN ANAN ANAN ANAN ANAN
Principal Place of Business - No P O. Box #     Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.		
City & State	City & Stale		01052007 Chg-P CR2E034 (12/06)
			65-0108587 Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired <b>\$8.75</b> Additional Fee Required
6. Name and Address of Current I	Registered Agent	Name	7. Name and Address of New Registered Agent
ROSENBERG, DONALD S. ONE S.E. THIRD AVE. STE 3050		Street Addre	ss (P.O. Box Number is Not Acceptable)
IAMI, FL 33131		City	FL Zip Code
The above named exity submits this statement for the obligations of resistered agent.      IGNATURE     Sensure productives name of registered agent a      FILE NOW FEE IS \$150.00      After May 1, 2007 Fee will be \$550.0	nd title it applicable (NOT 9. Election Campa	E Registered Agent signature req	istered agent, or both, in the State of Florida. I am familiar with, and accept  x red when reinstaing?  \$5.00 May Be Added to Fees
0. OFFICERS AND 1	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
ILE DVT HOFMANN, ROBERT L. IREET ADDRESS 3161 NW 112TH AVE. IVY-ST-ZIP CORAL SPRINGS, FL	Delate	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change Addition
TLE DPS MME ROSENBERG, DONALD S. REET ADDRESS ONE SE THIRD AVE STE 3050 TY-ST-ZIP MIAMI, FL	Deleie	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change [] Addition
ILE ME HEET ADDRESS IY-ST-ZIP	Delete	NAME STREET ADORESS	VP Lori E. Rosenberg One S.E. Third Avenue, #3050 Miami, FL 33131
LE ME HEET ADDRESS IY-ST-ZIP	Delete	THTLE NAME STREFT ADDRESS CITY-ST-ZIP	Change ] Addition
LE ME REET ADDRESS IY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY+ST-ZIP	Change Addition
ILE ME REET ADDRESS I'Y-ST-ZIP	Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP	Change Addition
indicated on this report or supplemental report is	true and accurate and that n wered to execute this report	ny signature shall have t as required by Chapter	ned in Chapter 119, Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or director 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if
			.5.07 305 358 2600