2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Mar 24, 2004 8:00 am
Secretary of State
03-12-2004 90227 017 ****50.00

DOCUMENT # L00000000167

1. Entity Name
ROYAL HOUSE DEVELOPMENT, L.L.C.

Principal Place of Business	Mailing Address
~~1408 WEST LAKE DRIVE~~	~~1408 WEST LAKE DRIVE~~
~~FORT LAUDERDALE, FL~~ 33316	~~FORT LAUDERDALE~~, FL 33316

34UU2UJ0

02062004 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
2531 DEL LAGO DR.	2531 DEZ LAGO DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FT. LAUDERDALE, FL	City & State: FT. LAUDERDALE, FL
Zip: 33316 Country: USA	Zip: 33316 Country: USA

4. FEI Number 65-1012094 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NUNEZ, MIKE	Name
~~1408 WEST~~ LAKE DRIVE 2513 DEZ LAGO DR	Street Address (P.O. Box Number is Not Acceptable)
~~FORT~~ LAUDERDALE, ~~FL 33316~~ FT. LAUDERDALE FL 33316	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 ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTNR NUNEZ, MIKE ~~1408 WEST~~ LAKE DRIVE ~~PORT LAUDERDALE~~, FL 33316	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	(NUNEZ) PRES 2531 DEL LAGO DR. FT. LAUDERDALE FL 33316	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [signature] 2/16/04 305 948.1284
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #