

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005046

FILED
Aug 21, 2005
Secretary of State

Entity Name: ROYAL BLUE SERVICE CORPORATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

17046 NW 66 CT
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

17046 NW 66 CT
MIAMI, FL 33015

New Mailing Address:

FEI Number: 04-3701205 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVIS, EARL
17046 NW 66 CT
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DAVIS, EARL
Address: 17046 NW 66 CT
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: GAINEY, ANDRE L
Address: 1221 NW 33 ST
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: JONES, FRED
Address: 536 S BISCAYNE RIVER DR
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: KEMP, WILKES J SR.
Address: 12750 SW 92 CT
City-St-Zip: MIAMI, FL 33176

Title: FS () Delete
Name: SEARCY, RILEY
Address: 490 NE 131 ST
City-St-Zip: NORTH MIAMI, FL 33161

Title: RS () Delete
Name: BROWN, DEMONT
Address: 14210 JACKSON ST
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RILEY SEARCY

RS

08/21/2005

Electronic Signature of Signing Officer or Director

Date