

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000014223

Entity Name: ROYAL GARDEN SUPPLIES, INC.

FILED
Mar 24, 2006
Secretary of State

Current Principal Place of Business:

479 N.W. 27TH AVE.
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

479 N.W. 27TH AVE.
MIAMI, FL 33125

New Mailing Address:

FEI Number: 65-1075654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAUDRON, OLIVIER
479 N.W. 27TH AVENUE
MIAMI, FL 33125 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: PD () Delete
Name: CAUDRON, OLIVIER
Address: 16 WEST DILIDO DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VT () Delete
Name: REMEDIOS-CAUDRON, MARLEN
Address: 16 WEST DILIDO DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: S (X) Delete
Name: BROWN, JOANN
Address: 1633 GREER AVE
City-St-Zip: HOMESTEAD, FL 33035

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLIVIER CAUDRON

PD

03/24/2006

Electronic Signature of Signing Officer or Director

Date