## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 20, 2006 08:00 AM DOCUMENT # P01000016321 **Secretary of State** 1. Entity Name ROYAL'S BEACHWEAR, INC.-Principal Place of Business Mailing Address 160 E. COCOA BCH CSWY. 160 E. COCOA BCH CSWY. COCOA BCH, FL 32931 COCOA BCH, FL 32931 01172006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3701412 Not Applicat \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SACCHITELLA, STEVEN K DO NOT WRITE 25 N ORLANDO AVE COCOA BEACH, FL 32931 IN THIS SPACE 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 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME SHAN, KHWAJA A STREET ADDRESS 2418 GREENHOUSE PKY CITY-ST-ZIP ALPHARETTA, GA 30022 PSTD TITLE SACCHITELLA, STEVEN NAME STREET ADDRESS 25 N ORLANDO AVE ---- U00000392304 01/24/06-80077-004 150.08 CiTY-ST-702 COCOA BEACH, FL 32931 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR