2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006
Secretary of State

DOCUMENT# P01000039034

Entity Name: ROYAL HEALTH CARE, INC.

Current Principal Place of Business:

8400 N UNIVERSITY DR, SUITE 213
TAMARAC, FL 33321

New Principal Place of Business:

8400 N. UNIVERSITY DR,
SUITE 213
TAMARAC, FL 33321 US

Current Mailing Address:

8400 N UNIVERSITY DR, SUITE 213
TAMARAC, FL 33321

New Mailing Address:

8400 N UNIVERSITY DR,
SUITE 213
TAMARAC, FL 33321 US

FEI Number: 65-1095706 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWIS, JEWELL
8400 N UNIVERSITY DR, SUITE 213
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

LEWIS, JEWELL
8400 N UNIVERSITY DR,
SUITE 213
TAMARAC, FL 33321 US

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: JEWELL LEWIS 02/21/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: LEWIS, JEWELL
Address: 8400 N UNIVERSITY DR, SUITE 213
City-St-Zip: TAMARAC, FL 33321

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. (X) Change ( ) Addition
Name: LEWIS, JEWELL
Address: 8400 N. UNIVERSITY DR, SUITE 213
City-St-Zip: TAMARAC, FL 33321 US

Title: MS. ( ) Change (X) Addition
Name: LEWIS, JEWELL
Address: 8400 N. UNIVERSITY DR. SUITE213
City-St-Zip: TAMRAC, FL 33321 US

Title: MS. ( ) Change (X) Addition
Name: LEWIS, JEWELL
Address: 8400 N. UNIVERSITY DR. SUITE 213
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City-St-Zip: TAMRAC, FL 33321 US

Title: MS.. ( ) Change (X) Addition
Name: LEWIS, JEWELL
Address: 8400 N. UNIVERSITY DR. SUITE 213
City-St-Zip: TAMRAC, FL 33321 US

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: JEWELL LEWIS MS. 02/21/2006
Electronic Signature of Signing Officer or Director Date