2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000111060

Entity Name: ROYAL HOMES INC

City-St-Zip:

FILED Jan 15, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1846 S TAMIAMI TRAIL 1734 S TAMIAMI TRAIL **UNIT #15** VENICE, FL 34293 VENICE, FL 34293 **New Mailing Address: Current Mailing Address:** 5143 POMPANO RD VENICE, FL 34293 FEI Number: 02-0544752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OSIPOV, GENNADIY OSIPOV, OLEG 5143 POMPANO RD 5143 POMPANO RD VENICE, FL 34293 VENICE, FL 34293 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: VITALIY OSIPOV 01/15/2003 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition Title: () Delete Title: PUT, VICTOR OSIPOV, VITALIY Name: Name: 5143 POMPANO ST 2661 S CRANBERRY BLVD Address: Address: City-St-Zip: VENICE, FL 34293 City-St-Zip: NORTH PORT, FL 34287 Title: () Delete Title: VΡ () Change (X) Addition Name: Name: PUT. VIKTOR 2680 CARMINE RD Address: Address: VENICE, FL 34293 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition OSIPOV, OLEG Name: Name: 5143 POMPANO RD. Address Address: City-St-Zip: City-St-Zip: VENICE, FL 34293 Title: () Delete Title: () Change (X) Addition LYKHVAR, RAISA Name: Name: Address: Address: 5143 POMPANO RD

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

VENICE, FL 34293

SIGNATURE: VITALIY OSIPOV P 01/15/2003