2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P01000116875

1. Entity Name ROYAL IMPERIAL INVESTMENTS, INC.



Jan 12, 2004 08:00 AM **Secretary of State**

Principal Place of Business

D-110 2663 AIRPORT RD

STE 110 NAPLES, FL 34112 Mailing Address

D-110 2663 AIRPORT RD

STE 110

NAPLES, FL 34112



FILED

	DO	NOT	WRITE	IN	THIS	SPAC	E
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No Chg-P 01082004 CR2E034 (10/03)

4. FEI Number 03-0461427

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

BRYANT, EDWARD R JR. 110 2663 AIRPORT ROAD SOUTH STE D-110 NAPLES, FL 34112

DO NOT WRITE IN THIS SPACE

			[
	named entity submits this statement for the pions of registered agent.	urpose of changing its regis	stered office or a	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept			
SIGNATURE.	Signature, typed or printed name of registered agent and this	applicable (NOTE Regi	stered Agent signatur	e required when reinstating)	DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.						
10.	OFFICERS AND DIREC	TORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEEHAN, NANCY J 200 FOREST LAKES BLVD 309 NAPLES, FL 34110							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEEHAN, JASON L 1751 IMPERIAL GOLD COURSE BLVI NAPLES, FL 34110)			U00000001923 81/12/04-80031-001 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE				IN THIS SPACE				

12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Zlavay

STREET ADDRESS

STREET ACCRESS CITY-ST-ZIP TIB F NAME STREET ADDRESS (2714-57-37)

CITY-ST-ZP

TITLE

200 FOREST LAKES BLVD 10 311

NAPLES, FL 34105

THE TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

597-6212