## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000077411

Name:

Address:

City-St-Zip:

AULENSI, JERÍ LYNN

FORT LAUDERDALE, FL 33308

3313 NE 32 ST.

Entity Name: ROYAL PALM REALTY GROUP, INC

FILED Apr 06, 2005 Secretary of State

Entity Nar	ne: ROYAL	PALM REALTY GROUP, I	NC.				
Current Principal Place of Business:			New Prin	New Principal Place of Business:			
3313 NE 32 FT LAUDE	2 ST RDALE, FL	33308					
Current M	ailing Addr	ess:	New Mai	New Mailing Address:			
3313 NE 32 FT LAUDE	2 ST RDALE, FL	33308					
FEI Number: 16-1624899 FEI Number Applied For ( )		) FEI Number Not Ap	FEI Number Not Applicable ( )		Certificate of Status Desired ( )		
Name and	Address of	Current Registered Age	nt: Name an	Name and Address of New Registered Agent:			
408 W UNI	MAS G ESQ VERSITY AV LLE, FL 326	/E STE 108B 01 US					
The above in the State	named entit	y submits this statement fo	r the purpose of changing	its registere	d office or registered agent	, or both,	
SIGNATUR							
Election Can		onic Signature of Registereing Trust Fund Contribution (	•		Date		
OFFICERS	AND DIRE	CTORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	AULENSI, EF 3313 NE 32 S		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	TIMMINS, MA 3313 NE 32 S		Title: Name: Address: City-St-Zip:	VD GOUGE, KA 3313 NE 32 FORT LAUE			
Title:	Т	) Delete	Title:		( ) Change ( ) Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: KATHY L GOUGE VD 04/06/2005