2005 FOR PROFIT CORPORATION ~ ANNUAL REPORT

FILED Mar 17, 2005 08:00 AM Secretary of State

	AMMOAL	KEPOKI		11111 17, 2000 00.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
DOCUMENT # P02000085668 1. Entity Name ROYAL MANSIONS SPA RESORT INC.				Secretary of Sta	ate
7021 ENVIR	on of Business ON BLVD.#419 , FL 33319	Mailing Address 7021 ENVIRON BLVD.#419 LAUDERHILL, FL 33319			!! !
E	OO NOT WRITE	IN THIS SPA	CE	03012005 No Chg-P CR2E034 (10/03) 4. FEI Number	or icable
	6. Name and Address of Current	Registered Agent		7 00 110441110	
	NANIA IRON BLVD#419 IILL, FL 33319			DO NOT WRITE IN THIS SPACE	
	tions of registered agent.		ed office or register	tered agent, or both, in the State of Florida. I am familiar with, and active agent, or both, in the State of Florida. I am familiar with, and active agent, or both and active agent, or both agent, and active agent, or both agent, and active agent, or both, in the State of Florida. I am familiar with, and active agent, or both, in the State of Florida. I am familiar with, and active agent, or both, in the State of Florida. I am familiar with, and active agent, active agent, and active agent, a	cept
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	S. Election Campaign Fina Trust Fund Contribution.		5.00 May Be dded to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DERI, HANANIA 7021 ENVIRON BLVD.#419 LAUDERHILL, FL 33319	DIRECTORS _	U00000266594 		
TITLE NAME STREET ADDRESS GITY-ST-ZIP				<u></u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	-			
TITLE NAME STREET ADDRESS CITY-SI-ZIP					نستداند
12. I hereby of indicated of the corchanged	certify that the information supplied with I on this report of supplemental report is rporation or the receiver or trustee empor , or on an attachment with an address,	this filing does not qualify for the exe tripe and accurate and that my signs wered to execute this report as requ with all other like empowered.	emption stated in Se ture shall have the ired by Chapter 607	Section 119.07(3)(i), Florida Statutes. I further certify that the informat the same legal effect as if made under cath; that I am an officer or dire 507, Florida Statutes, and that my name appears in Block 10 or Block	ion ctor 11 if

INTED NAME OF SIGNING OFFICER OR DIRECTOR