2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 22, 2008 8:00 am Secretary of State

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DOCUMENT # P02000113004 1. Entity Name ROYAL SEA, INC.					. 0.11		8 90073 0	47 ***15	0.00	
Principal Place	e of Business	Mailing Address			100	1010				
7700 CONGR	PESS AVENUE	7700 CONGRESS AVENUE								
SUITE 2206	RESS MENGE	SUITE 2206								
BOCA RATON, FL 33487 BOCA RATON, FL 33487										
2. Principal Place of Business No P.O. Box # 3. Mailing Address				Au£						
Suite, Apt	1139	Suite, Apt. #, etc. //3	,9		01122008	Chg-P	CR2E03	4 (12/06)		
SUCA State	- PCATON PL	BUCA RATUA	J PL		4. FEI Number 54-2079				plied For t Applicable	
334 334	Country (3548)	Country			f Status Desired		8.75 Add see Required	itional 1	
	6. Name and Address of Current R	legistered Agent	<u> </u>		7. Name and A	Address of New	Hegistered A	gent		
MILLED 14	OHN B		Name							
MILLER, JOHN P 2499 GLADES RD. #305-A				Street Address (P.O. Box Number is Not Acceptable)						
	TON, FL 33431									
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	A STATE OF THE STA		City				FL	Zip Code	9	
	named entity submits this statement for ions of registered agent.	the purpose of changing its reg	istered office or	register	ed agent, or both	, in the State of I	florida. I am fa	amiliar with,	and accept	
	7.									
SIGNATURE_	Signature, typed or primed name of registered agent an	nd title if applicable. (NOTE: Reg	gistered Agent signati	ure required	when reinstating)		DATE			
	e priki									
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0				00 May Be ed to Fees					
	E NOWIII FEE IS \$150.00	Trust Fund Contribu			ed to Fees	CHANGES TO O	FICERS AND		FTÑ 11	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:

Tean Clarde Ma

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-17-08 (56) 98-8864