## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Jun 22, 2004 8:00 am Secretary of State

DOCUMENT # P03000034754 06-22-2004 90001 034 \*\*\*150.00 ROYÉR ENTERPRISES, INC. Principal Place of Business Mailing Address 54058367 3307 NW 69TH COURT 3307 NW 69TH COURT FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 06172004 Chg-P City & State City & State 4. FEI Number Applied For Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROYER-JAY-A-Street Address (P.O. Box Number is Not Acceptable) 3307 NW 69TH COURT FORT LAUDERDALE, FL 33309 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. DIR ☐ Addition TITLE ☐ Delete TITLE □ Change NAME ROYER, JAY A NAME 3307 NW 69TH COURT STREET ADDRESS STREET ADDRESS FORT LAUDERDALE, FL 33309 CITY-ST-ZIP CITY-ST-ZIP DIR TITLE ☐ Delete TITLE ☐ Change ■ Addition ROYER, YVETTE NAME NAME STREET ADDRESS 3307 NW 69TH COURT STREET ADDRESS FORT LAUDERDALE, FL 33309 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 fustee 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 kelempowered.

SIGNATURE:

DIERCTOR PRINTED NAME OF SIGNING OFFICER OR DIRECTO



ROYER ENTERPRISES INC.

June 18, 2004

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

"I informed the person, at your office whom I spoke with on the phone today. I did not receive my postcard in the mail. This is the first year of my renewal. She told me to write that in a letter and mail my report in along with the check for \$150.00

Thank you for your assistance in this matter.

Very truly yours,

Jay A. Royer Director

Enclosures

3307 NW 69th Court Fort Lauderdale, FL 33309