FILED
May 12, 2004 8:00 am
Secretary of State
04-23-2004 90199 047 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P03000150679

1. Entity Name
LAROYALE FISHING & TRADING INC.

66420947

Principal Place of Business	Mailing Address
5865 C.R. 208 LOT B SAINT AUGUSTINE, FL 32092 US	5865 C.R. 208 LOT B SAINT AUGUSTINE, FL 32092 US

04202004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
	3125-B. PACETTI ROAD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: ST. AUGUSTINE, FL.
Zip / Country	Zip: 32092 Country: USA

4. FEI Number: 33-1078280 (~~65-0012964375-8~~) ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COLEE, TEDDY 5865 C.R. 208 LOT B SAINT AUGUSTINE, FL 32092	Name: J. BARRY HEINRICH, JR. Street Address (P.O. Box Number is Not Acceptable): 3125-B PACETTI ROAD City: ST. AUGUSTINE, FL Zip Code: 32092

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 ______

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P COLEE, TEDDY 5865 C.R. 208 LOT B SAINT AUGUSTINE, FL 32092 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P. J. BARRY HEINRICH, JR. 3125-B. PACETTI ROAD. ST. AUGUSTINE, FL. 32092 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC HORTON, MARY 5865 C.R. 208 LOT B SAINT AUGUSTINE, FL 32092 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC. L.J. SACKS PO BOX 4216 ST. AUGUSTINE, FL. 32085 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: [signature] J. Barry Heinrich Jr. 4-20-2004 669-0356
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #