## **2006 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**



FILED Apr 28, 2006 8:00 am Secretary of State

Daytime Phone #

DOCUMENT # P04000145056  1. Entity Name ROYAL CUSTOM CABINETRY, INC.					04-28-2006 90194 016 ***150.00				
Principal Place of Business 7512 DR. PHILLIPS BLVD. STE. 50, #358 ORLANDO, FL 32819 US  2. Principal Place of Business TIGS TU Key Lake Lead Suite, Apt. #, etc.  Mailing Address 7512 DR. PHILLIPS BLVD. STE. 50, #358 ORLANDO, FL 32819 US  3. Mailing Address TU Key Lake Suite, Apt. #, etc.				Kexed					
City & State City & State				·····	04172006 4. FEI Number	Chg-P	CR2E03	· · ·	plied For
Orlando, Th		Octando, PC			20-180			_ <del> </del>	t Applicable
Zip		Zip Country		у	5. Certificate	of Status Desired		8.75 Add	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
SEGALL, SANDY S				Name					
1851 NW 125TH AVE. 300				Street Address (P.O. Box Number is Not Acceptable)					
PEMBROKE PINES, FL 33028									
				City			FL	Zip Codi	е
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 privated name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  On the content of the private of the pr									
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	Selection Campaig     Trust Fund Contri			.00 May Be ed to Fees				
10.	OFFICERS AND DIRECTORS 11.				ADDITIONS/	CHANGES TO OFF	ICERS AND (	DIRECTOR	3 1N 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SEGALL, ALAN M 8615 SANDLAKE SHORES DR. ORLANDO, FL 32836	☐ Delete	TITLE NAME STREE CITY-5	T ADDRESS -				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RYAN, STEVEN T 7611 HEATHFIELD CT. ORLANDO, FL 32835	☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS				Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREE	T ADORESS				Change	☐ Addition
12. I hereby indicated	certify that the information supplied with on this report or supplemental report is progration or the receiver of the tendental report is	this filing does not qualify for	the exer	mptions contained ure shall have the	in Chapter 119	), Florida Statutes. I et as if made under d	further certificath; that I an	y that the ir	nformation or director