


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000085657 1. Entity Name THE ROYAL HOUSE CORPORATION	
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Principal Place of Business 13121 S.W. 122ND AVE. MIAMI, FL 33186 US	Mailing Address 13121 S.W. 122ND AVE. MIAMI, FL 33186 US
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04272005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0469067	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent OSETE, MARCOS 13121 SW 122ND AVENUE MIAMI, FL 33186

DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstalling)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OSETE, RICHARD 14431 SW 111 ST MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OSETE, MARCOS 14431 SW 111 ST MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFM OSETE, KARLA E 14431 S.W. 111 STREET MIAMI, FL 33186
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U000000348866 05/02/05-80042-023 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	(MARCOS OSETE) 4-27-2005/305-255-2242 <small>Date Daytime Phone #</small>
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