


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P94000072670</b> 1. Entity Name <b>ROYAL PALM DRAFT HOUSE &amp; SPORTS BAR, INC.</b>	
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Principal Place of Business <b>1136 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411 US</b>	Mailing Address <b>2161 PALM BEACH LAKES BLVD. SUITE 403 WEST PALM BEACH, FL</b>
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02022005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0613671</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>PREEFER, RICHARD 2161 PALM BEACH LAKES BLVD. SUITE 403 WEST PALM BEACH, FL</b>
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PREEFER, RICHARD 2161 PALM BEACH LAKES BLVD., SUITE 403 WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PREEFER, JAY C 2161 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33409
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04/13/05-80018-019 150.00

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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: Richard Preefer Date: 4/4/05 Daytime Phone #: 561-689-7706  
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR