

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000066035

Entity Name: ROYAL TAPESTRY, INC.

FILED
Apr 09, 2004
Secretary of State

Current Principal Place of Business:

4809 NW 19TH ST.
COCONUT CREEK, FL 33063

New Principal Place of Business:

Current Mailing Address:

PO BOX 956
POMPANO BEACH, FL 33061

New Mailing Address:

FEI Number: 65-0698201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, EVELYN L
4809 NW 19TH ST.
COCONUT CREEK, FL 33063

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: HARRIS, EVELYN
Address: 4809 NW 19TH ST.
City-St-Zip: COCONUT CREEK, FL 33063 US

Title: D () Delete
Name: SANTINO, VINCE MR
Address: 381 NW 36TH ST.
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: D () Delete
Name: JORDAN, ANTHOS MR.
Address: 260 NW 24TH CT
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: KNAPPONBERGER, JALA
Address: 1319 NE 14TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: JOHNSON, CHARLES T MR.
Address: 4809 NW 19TH STREET
City-St-Zip: COCONUT CREEK, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVELYN L. HARRIS

PS

04/09/2004

Electronic Signature of Signing Officer or Director

_____ Date