


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000090512	
1. Entity Name ROYAL BLACK WATCH, INC.	

Principal Place of Business 3801 PGA BLVD 806 PALM BEACH GARDENS, FL 33410	Mailing Address P.O. BOX 30633 PALM BEACH GARDENS, FL 33410-0633
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FILED
04 APR 16 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04142004 No Chg-P CR2E034 (10/03)

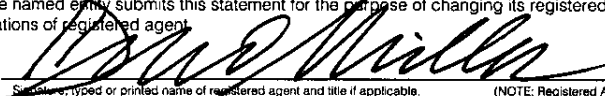
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4. FEI Number 65-0788643	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MILLER, DONALD W 3801 PGA BLVD SUITE 806 PALM BEACH GARDENS, FL 33410

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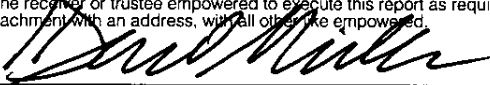
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: 	DATE: 4-14-04
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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	D MILLER, DONALD W 3801 PGA BLVD 806 PALM BEACH GARDENS, FL 33410
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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 fee empowered.	
SIGNATURE: 	DATE: 4-14-04 351-366-7000
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	