

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000007756

Entity Name: ROYAL FOAM, INC.

FILED  
Mar 04, 2008  
Secretary of State

## Current Principal Place of Business:

1333 HAINES ST  
JACKSONVILLE, FL 32206

## New Principal Place of Business:

## Current Mailing Address:

1333 HAINES ST  
JACKSONVILLE, FL 32206 US

## New Mailing Address:

FEI Number: 59-3488946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALY, NIKOLAY  
1333 HAINES ST  
JACKSONVILLE, FL 32206 US

## Name and Address of New Registered Agent:

KULBAKA, VYACHESLAV  
1333 HAINES ST  
JACKSONVILLE, FL 32206 US

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: KULBAKA VYACHESLAV

03/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KULBAKA, VYACHESLAV  
Address: 1333 HAINES ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: VPST ( ) Delete  
Name: KULBAKA, VALENTYN  
Address: 1333 HAINES ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete  
Name: KULBAKA, VALENTYN  
Address: 1333 HAINES ST  
City-St-Zip: JACKSONVILLE, FL 32206

## 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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: KULBAKA VYACHESLAV

PD

03/04/2008

Electronic Signature of Signing Officer or Director

Date