


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 19, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S21164</b> 1. Entity Name ROYCLEVE, INC.	
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Principal Place of Business 739 CORTARO DRIVE RUSKIN, FL 33573	Mailing Address 739 CORTARO DRIVE RUSKIN, FL 33573
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**DO NOT WRITE IN THIS SPACE**



04132004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3041121	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  HARPER, ROY C. 2119 LONE PALM DRIVE WIMAUMA, FL 33598	<b>DO NOT WRITE IN THIS SPACE</b>
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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 _____ <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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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000120070 64-19-04-60121-001 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTR HARPER, ROY 739 CORTARO DRIVE RUSKIN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS KAREN HARPER 739 CORTARO DR RUSKIN, FL
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**DO NOT WRITE  
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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)(b), 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: <i>Karen Harper</i> KAREN HARPER	Date 4-14-04	Daytime Phone # (813) 634-4028
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