2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 05, 2007 08:00 AM DOCUMENT # S49378 **Secretary of State** 1.-Entity Name ROYAL SERVICE & EQUIPMENT, INC. Principal Place of Business Mailing Address **4929 MURRAY HILLS DRIVE 4929 MURRAY HILLS DRIVE** .TAMPA, FL .33615 TAMPA, FL .33615 -01032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. .FEI Number 59-3060528 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent L'ORENZO, JACK'E: SR. DO NOT WRITE 4929 MURRAY HILLS DRIVE TAMPA, FL 33615 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 aignature required when reinstating) Signature, typed or crinted name of registered agent and title if applicable 9. Election Campaign Financing \$5:00 May Be U000000622521 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. \Box Added to Fees After May 1, 2007 Fee will be \$550.00 02/13/07-80029-007 150.00 10. OFFICERS AND DIRECTORS TITLE LORENZO, JACK E. S. NAME STREET ADDRESS 4929 MURRAY HILL DRIVE TAMPA, FL .33615 CITY-ST-ZIP BILE LORENZO, JACK E. J 10903 TAILFEATHER CT. . STREET ADORESS CITY-ST-ZIP TAMPA, FL LORENZO, GARY A. MAKE STREET ADDRESS 4929 MURRAY-HILL DRIVE DO NOT WRITE CITY-ST-ZIP TAMPA, FL IN THIS SPACE TITLE STREET ADMRESS CHY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TTILE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 employered 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 gither like empowered.

SIGNATURE:

FRINTED HAME OF SENING OFFICER OR DIRECTOR

7 873-888-7872

FILED