# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 24, 2004 8:00 am**
**Secretary of State**
03-24-2004 90005 007 ***150.00

DOCUMENT # 276160

1. Entity Name
RANON, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 5109 N HOWARD AVE<br>TAMPA, FL 33603-1417 | 5109 N HOWARD AVE<br>TAMPA, FL 33603-1417 |

| 2. Principal Place of Business | | 3. Mailing Address | |
|---|---|---|---|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

03082004 Chg-P CR2E034 (10/03)

4. FEI Number 59-1027052 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| EXUM, EILEEN<br>5109 N. HOWARD AVENUE<br>TAMPA, FL 33603 | Name: JOSEPH A. RANON, JR.<br>Street Address (P.O. Box Number is Not Acceptable): 5109 N HOWARD AVENUE<br>City: TAMPA FL Zip Code: 33603 |

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: Joe A Ranon Jr 3-19-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>RANON,ANGEL<br>5109 N. HOWARD AVENUE<br>TAMPA, FL | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>RANON,JOSE A<br>5109 N. HOWARD AVENUE<br>TAMPA, FL | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>EXUM, EILEEN<br>5109 N. HOWARD AVENUE<br>TAMPA, FL | ☒ Delete | JR, RANON, JOSEPH A.<br>5109 N HOWARD AVENUE<br>TAMPA, FL 33603 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PT<br>RANON, CARLOS B.<br>5109 N. HOWARD AVENUE<br>TAMPA, FL | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>BABANATS, GEORGE NICK<br>5109 N. HOWARD AVENUE<br>TAMPA, FL | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |

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 like empowered.

**SIGNATURE:** Joseph A Ranon 3/19/04 813-312-2725
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #