


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2004 8:00 am
Secretary of State

07-21-2004 90021 014 ***150.00

DOCUMENT # P0000061824			
1. Entity Name RAM'S AUTO CENTER, INC.			
Principal Place of Business 2100 PALM BAY RD PALM BAY, FL 32905		Mailing Address 961 HAAS AVE. N.E. PALM BAY, FL 32907	
2. Principal Place of Business		3. Mailing Address 2100 PALM BAY RD N.E.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State PALM BAY, FL	
Zip	Country	Zip 32905	Country USA
4. FEI Number 59-3659526		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		7. Name and Address of New Registered Agent	
ZIES, G. PHILIP J 15 SILVER PALM AVE. MELBOURNE, FL 32901		Name MICHAEL SARABJIT	
		Street Address (P.O. Box Number is Not Acceptable)	
		13120 SW 21ST STREET	
		City MIRAMAR FL Zip Code 33027	
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 <i>Michael Sarabjit</i>		MICHAEL SARABJIT	
Signature, typed or printed name of registered agent and so if applicable.		(NOTE: Registered Agent signature required when reinstating)	
DATE 6/20/04			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	RAMHARRACK, HERMAN <input checked="" type="checkbox"/> Delete	TITLE P/S/D	OLGA RAMHARRACK <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	961 HAAS AVE. N.E.	NAME	961 HAAS AVENUE N.E.
STREET ADDRESS	PALM BAY, FL 32907	STREET ADDRESS	PALM BAY, FL 32907
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE PMGR	RAMHARRACK, HERMAN <input checked="" type="checkbox"/> Delete	TITLE V	ROBERT RAMHARRACK <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	961 HAAS AVE. N.E.	NAME	961 HAAS AVENUE N.E.
STREET ADDRESS	PALM BAY, FL 32907	STREET ADDRESS	PALM BAY, FL 32907
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE T	RAMHARRACK, RICARDO <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	961 HAAS AVE NE	NAME	
STREET ADDRESS	PALM BAY, FL 32907	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE S	RAMHARRACK, RACQUEL <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	961 HAAS AVE NE	NAME	
STREET ADDRESS	PALM BAY, FL 32907	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE VT	RAMHARRACK, RIDARDO <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	961 HAAS AVE. NE	NAME	
STREET ADDRESS	PALM BAY, FL 32907	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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: <i>Olga Ramharrack</i>		OLGA RAMHARRACK, P, 6/20/04 (321) 725-4750	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

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