


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000095483
 1. Entity Name
 RICARDO RAMOS, P.A.



Principal Place of Business
 12900 SW 21ST STREET
 MIAMI, FL 33175

Mailing Address
 12900 SW 21ST STREET
 MIAMI, FL 33175

DO NOT WRITE IN THIS SPACE



06032005 No Chg-P CR2E034 (10/03)

4. FEI Number
 65-1047961

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

RAMOS, RICARDO
 12900 SW 21ST STREET
 MIAMI, FL 33175

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PA RAMOS, RICARDO 12900 SW 21ST STREET MIAMI, FL 33175
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 06/06/05-200004-025 150.00

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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)(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: *Ricardo Ramos* Ricardo Ramos 06-03-05 (305) 322-0083
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #