


**FILED**  
**Feb 21, 2005 8:00 am**  
**Secretary of State**

01-20-2005 90019 005 \*\*\*150.00

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # P01000063311 1. Entity Name RAMDELSA INC.	
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Principal Place of Business 8007 KIMBERLY BLVD. NORTH LAUDERDALE, FL 33068	Mailing Address 8007 KIMBERLY BLVD. NORTH LAUDERDALE, FL 33068
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66002328



01122005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1116303	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

ESTEVEZ, RAMON  
3920 N.W. 108TH AVENUE  
CORAL SPRINGS, FL 33065

**DO NOT WRITE 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 Ramon Estevez President. 1-14-05  
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, 2005 Fee will be \$550.00**

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	PD ESTEVEZ, RAMON 3920 N.W. 108TH AVENUE CORAL SPRINGS, FL 33065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ESTEVEZ, DELSA 3920 N.W. 108TH AVENUE CORAL SPRINGS, FL 33065
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Ramon Estevez 2-15-05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #