2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2006 08:00 A
Secretary of State

		44	•		C	CC
DOCUMENT # P02000035554 1. Entity Name RAMADEV INC.					Secreta	ry of Stat
·	Mailing Address					
	13771 SOUTH US HWY 441 LAKE CITY, FL 32025					
		رد رد د د د د د د د د د د د د د د د د د) 			
<u> </u>	<u> </u>	. 4				
DO NOT WRITE IN THIS SPA		CE	03152006	No Chg-F	CR2E034	(11/05)
			4. FEI Numb			Applied For
			30-007	3330		Not Applicable
	or as we will be a single of the single of t		5. Certificate	of Status Desir		Required
6. Name and Address of Current Reg	istered Agent					
PATEL, JAYANTI M 13771 SOUTH US HWY 441 LAKE CITY, FL 32025			DO	NOT '	WRITE	
			IN "	THIS S	SPACE	
			F 11	11110	JI AQL	
The above named entity submits this statement for the the obligations of registered agent	purpose of changing its register	ed office or registe	red agent, or bo	oth, in the State	of Florida. I am fam	iliar with, and accept
SIGNATURE		,			<u>.</u>	
Signature, typed or printed name of registered agent and Mil	le if applicable (NOTE Registere	d Agent signature requires	d when reinstating)	3 0 5 ger a **	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		.00 May Be led to Fees			
10. OFFICERS AND DIRE	CTORS	4				
NAME PATEL, JAYANTI M STREET ADDRESS 13771 SOUTH US HWY 441						
CITY ST ZIP LAKE CITY, FL 32025		1	. #		<i>2</i>	-
NAME PATEL, JIGNESH				na zocan	00 4 77 13 2 6-80040-00:	d
SIREET ADDRESS 13771 SOUTH US HWY 441 CITY-ST-ZIP LAKE CITY, FL 32025				CHAY NOV OR	5-800417-00:	4 150.00
TITLE		1				
NAME SFREET ADDRESS		Į				
CHY-ST-ZIP	ing the second of the second		DO	NOT	WRITE	
THLE	<u></u>		IN .	THIS S	SPACE	
NAME SIREEI ADDRESS						
CHY ST ZIP		1				
INTE						
NAME STRELI ADDRESS		1				
CITY-ST ZIP		1				
TITLE		1				
NAME STREET ADDRESS		1				
CITY-SI-ZIP	—	l				

12. I hereby certify that the information supplied with this filing does not quality 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 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:

SIGNATURE AND TYPED OR PRINTED IN

JEGNESH PAT

VS 3-12-20

386-752-758-