

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004906

Entity Name: RAMIREZ FINANCIAL GROUP, INC.

FILED  
May 02, 2007  
Secretary of State

## Current Principal Place of Business:

6261 N.W. 6 WAY SUITE #102  
FORT LAUDERDALE, FL 33309

## New Principal Place of Business:

1615 S FEDERAL HWY  
SUITE 201  
BOCA RATON, FL 33432

## Current Mailing Address:

1311 SW 20 AVENUE  
BOCA RATON, FL 33486

## New Mailing Address:

FEI Number: 02-0663851

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAMIREZ, MARILYN  
1311 SW 20TH AVE.  
BOCA RATON, FL 33486 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSDT ( ) Delete  
Name: RAMIREZ, MARILYN  
Address: 1311 SW 20TH AVE.  
City-St-Zip: BOCA RATON, FL 33486

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARILYN RAMIREZ

PRES

05/02/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date