

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000019171

FILED
Jan 12, 2004
Secretary of State

Entity Name: RAVINI USA, INC.

Current Principal Place of Business:

2799 SW 32ND AVENUE
PEMBROKE PARK, FL 33023

New Principal Place of Business:

Current Mailing Address:

2799 SW 32ND AVENUE
PEMBROKE PARK, FL 33023

New Mailing Address:

FEI Number: 43-2000098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OKSAYOGLV, ETEM
19430 NE 19TH CT.
N. MIAMI BCH, FL 33179 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ERMISLER, CENGIZ
Address: 2799 SW 32ND AVENUE
City-St-Zip: PEMBROKE PINES, FL 33023

Title: VD () Delete
Name: OKSAYOGLV, ETEM
Address: 19430 NE 19TH CT.
City-St-Zip: N. MIAMI BCH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ERMISLER, CENGIZ
Address: 2799 SW 32ND AVENUE
City-St-Zip: PEMBROKE PARK, FL 33023

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CENGIZ ERMISLER

PRES

01/12/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date