

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90010 043 ***150.00

DOCUMENT # 254079

1. Entity Name
RAMSAY ENTERPRISES, INC.



Principal Place of Business
**7411 MIAMI LAKES DR.
MIAMI LAKES, FL 33014**

Mailing Address
**7411 MIAMI LAKES DR.
MIAMI LAKES, FL 33014**

2. Principal Place of Business - No P.O. Box #
12401 ORANGE DR

3. Mailing Address
12401 ORANGE DR

Suite, Apt. #, etc.
127

Suite, Apt. #, etc.
127

City & State
DAVIE, FLA.

City & State
DAVIE, FLA

Zip
33330

Country
USA

Zip
33330

Country
USA

03082007

Chg-P

CR2E034 (12/06)

4. FEI Number
59-0967620

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**JOHN T. CULLEN
7411 MIAMI LAKES DR.
MIAMI LAKES, FL 33014**

7. Name and Address of New Registered Agent

Name
JOHN T. CULLEN

Street Address (P.O. Box Number is Not Acceptable)
12401 ORANGE DR.

SUITE # 127

City
DAVIE

FL

Zip Code
33330

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

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, 2007 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
**VSD
RAMSAY, SUZANNE L
7411 MIAMI LAKES DR.
MIAMI LAKES, FL 33014** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTC
RAMSAY, GRANVILLE L
7411 MIAMI LAKES DR.
MIAMI LAKES, FL 33014** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
RAMSAY, SUZANNE L. ☒ Change ☐ Addition
12401 ORANGE DR, STE # 127
DAVIE, FLA 33330**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTC
RAMSAY, GRANVILLE L. ☒ Change ☐ Addition
12401 ORANGE DR. STE # 127
DAVIE, FLA 33330**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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: SUE L. RAMSAY, VP/SECY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-07 954-862-3642
Date Daytime Phone #