## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90053 031 \*\*\*150.00

DOCUMENT	#	F31	053

1. Corporation												
RAMBAR	RAN INVESTMENTS, INC.						1			. <b>.</b>		
							1					
								:	<b>                    </b>		<b>   </b>	
Principal Place of Business Mailing Address						ļ						
C/O HARRY. RAMBARRAN 2625 HUNTER COURT 2625 HUNTER COURT FT LAUDERDALE FL 33331					İ	-						
FT. LAUDERDAL		US	AODENDALE TE OCCO					DO NOT WRITE IN THIS SPACE				
US								3. Date Incorporated or Qualifed				
								04/17/1981				
2. Principal P	lace of Business	2a. N	Mailing Address					4. FEI Number	· L	<del></del> -	ed For	
21		26						59-2144912			pplicable	
Suite, Apt.	#, etc.	, s	Suite, Apt. #, etc.					5. Certifcate of Status Desired		<b>5</b> Add Requ	ditional	
22		27										
City & State	e	$\vdash$	City & State					6. Election Campaign Financing		00 ма		
23		[28]	·					Trust Fund Contribution		ed to f	rees	
Zip	Country	<del></del>	<b>Zip</b>	_	untry			8. This corporation owes the current year	Intangible Yes	Γ-	]No .	
24	25	29		30	Τ			Personal Property Tax.  10. Name and Address of New Register	<u>·</u>		3110	
	9. Name and Address of Curren	t Registe	red Ayent		81	Name		10. Haire and Address of New Acguston	Ja Agont			
RAM	BARRAN, HARRY				L							
	HUNTER COURT				82	Street A	Address	s (P.O. Box Number is Not Acceptable)			[	
FT L	AUDERDALE FL 33331				83							
											<u>.</u>	
					84	City		F	L 85 2	Zip Co	de ,	
44 Dursuant	to the provisions of Sections 607 050	2 and 607	1508. Florida Statut	es the	abovi	e-named	corpora	ation submits this statement for the purpose	of changing	its re	gistered	
office or r	egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida	Such change was a	uthonze	หากง	the corno	oration's	s board of directors. I hereby accept the ap	pointment a	s regis	stered	
-	m tamiliar with, and accept the obligat	tions of, a	Section 007.0303, 110	riua Sta	itutes	٠.					J	
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if a	pplicable. (NOTE	Registere	d Ager	nt signature re	required wi	nen reinstating) DATE				
12.	OFFICERS AN	D DIREC	TORS	13.				ADDITIONS/CHANGES TO OFFICERS				
TITLE	PTD		☐ DELETE	1.1 7	TITLE				Char	ige	☐ Addition	
NAME	rambarran, Harry			1.21	VAME							
STREET ADDRESS	2625 HUNTER CT, WESTON			1.3 5	STREE	TADDRESS						
CITY-ST-ZIP	FT. LAUDERDALE FL			1.4 (	CITY-S	T-ZIP						
TITLE	SD		☐ DELETE	2.11	IITLE				Char	ige	Addition	
NAME	rambarran, edna d.			2.21	MAME			•				
STREET ADDRESS	2625 HUNTER CT, WESTON			2.3 9	STREE	TADORESS		•				
CITY-ST-ZIP	FT. LAUDERDALE FL			2.4	CITY-5	ST-ZIP	<u> </u>	<u> </u>				
TITLE	VP		☐ DELETE	3.1	FITLE				☐ Char	ige	☐ Addition	
NAME	RAMBARRAN, MICHAEL			3.21	NAME		1				)	
STREET ADDRESS	831 SW 96TH AVE			3.3 5	STREE	TADDRESS	1	•				
CITY-ST-ZIP	PEMBROKE PINES FL				CITY-5	ST-ZIP	<b> </b>				- Addisor	
TITLE			☐ DELETE	4.11	TITLE			. •	Char	ige	☐ Addition	
NAME					NAME						}	
STREET ADDRESS				4.3 8	STREE	TADORESS						
CITY-ST-ZIP		<del></del>	C) politic		CITY-S	T-ZIP			☐ Char		Addition	
TITLE			☐ DELETE		TITLE				. U Cilai	Ae		
NAME					NAME	TADDDESC		•				
STREET ADDRESS						T ADDRESS	1				ļ	
CITY-ST-ZIP			☐ DELETE		CITY-S	11-211	1-		☐ Char	nge	Addition	
TITLE			□ acresc		NAME				5,14	-3-	٠٠٠٠٠	
NAME						T ADDRESS	1				}	
STREET ADDRESS.	<u>'</u>			9.3 (		וטטאיטשייי	T				I	

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: