## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 14, 2005 08:00 AM Secretary of State

Daytme Phone #

DOCUMENT # G35963  1. Entity Name RAMLO DEVELOPMENT CORPORATION			Secretary of State	
209 DUVAL STREET		Mailing Address 209 DUVAL STREET KEY WEST, FL 33040		
ם	OO NOT WRIT	At any felorate	ACE	01252005 No Chg-P CR2E034 (10/03)  4. FEI Number
6. Name and Address of Current Register HALPERN, MICHAEL 209 DUVAL ST. KEY WEST, FL 33040		nt registered Agent		DO NOT WRITE IN THIS SPACE
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  9. Election Campaign Financing \$5.00 May Be				
After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees				
10.  IITLE NAME STREET ADDRESS CITY-ST-ZIP  IITLE NAME STREET ADDRESS CITY-ST-ZIP	PST HALPERN, MICHAEL 209 DUVAL STREET KEY WEST, FL VD RAMOS, HILARIO JR 1401 DUVAL ST KEY WEST, FL	ND DIRECTORS		_ 000000230064 02/15/05-80027-018 158.75
TITLE NAME STREET ADDRESS CITY -ST - ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY+ST-ZIP				
12. I hereby certify that the information supplied with this filling does not qualify 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 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 trusted 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 NAME OF SIGNING OFFICER OR DIRECTOR Days Dayson Proper V				