## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H68773				
1. Entity Name RAM INTERNATIONAL, INC.				FILED
•			08 JAN 17 AM 11: 39	
Principal Place of Business	Mailing Address	·	, .	1
2650 TANGLEWOOD TER PALM HARBOR, FL 3468 5 PALM HARBOR, FL 3468 5			Inl.	LAHASSEE, FLORIDA
. Principal Place of Business - No P.O. Box #	3. Mailing Address			
Suite, Apt. #, etc. Suite, Apt. #, etc			01102008 Chg-P	CR2E034 (12/06)
City & State	City & State	,	4. FEI Number 59-2566537	Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Curi	ent Registered Agent	Name	7. Name and Address of New	Registered Agent
SALLADIN, ANTHONY D 2650 TANGLEWOOD TR PALM HARBOR, FL 34685				
		Street Address	(P.O. Box Number is Not Acceptate	oie)
		City		FL Zip Code
<ol> <li>The above named entity submits this stateme the obligations of registered agent.</li> </ol>	nt for the purpose of changing its	s registered office or regist	ered agent, or both, in the State of f	Florida. I am lamiliar with, and accept
SIGNATURE				
Signature, typed or printed name of registered	igent and title if applicable. (NOT	E: Registered Agent signature requir	ed when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$5	9. Election Campa Trust Fund Con	· · · · · · · · · · · · · · · · · · ·	5.00 May Be ided to Fees	
1	AND DIRECTORS	11.	ADDITIONS/CHANGES TO OF	FFICERS AND DIRECTORS IN 11
AME SALLADIN, ANTHONY D TREET ADDRESS TO TANGFLEWOOD TR TO ST-ZIP  PALM HARBOR, FL 34685	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	<b>400116</b> 01/29/080103	□ Change □ Addition □ <b>5 1 7 4</b> 8006 **150.00
ITLE AME TREET ADDRESS ITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TLE AME IREET ADDRESS ITY-S1-ZIP	☐ Delete	THLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
ITLE AME TREET ADDRESS ITY - ST-ZIP	☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
itle Ame Treet address Ity-st-zip	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	.,	Change Addition
AME TREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>-</u>	☐ Change ☐ Addition
ITILE NAME STREET ADDRESS CITY-ST-ZIP  12. I hereby certify that the information supplied indicated on this report or supplied end rep of the corporation or the receiver of trustee changed, or on an attachment with an address	with this filing does not qualify fort is true and accurate and that smoowhed to execute this report	IIILE NAME SIRELI ADDRESS CITY-ST-ZIP or the exemptions contains my signature shall have the Las required by Chapter file	/ /	