

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90154 050 ***150.00

DOCUMENT # H68773

1. Entity Name
RAM INTERNATIONAL, INC.



Principal Place of Business
**7303 124TH AVENUE
LARGO FL 33773**

Mailing Address
**7303 124TH AVENUE
LARGO FL 33773**

2. Principal Place of Business
2879 Deer Hound Way
Suite, Apt. #, etc.

3. Mailing Address
2879 Deer Hound Way
Suite, Apt. #, etc.

City & State
Palm Harbor, FL

City & State
Palm Harbor, Fl

4. FEI Number **59-2566537**

Applied For
Not Applicable

Zip
34683

Country

Zip
34683

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**STOVER, MICHAEL J.
7303 124TH AVENUE
LARGO FL 33773**

7. Name and Address of New Registered Agent

Name
Salladin, Anthony D.
Street Address (P.O. Box Number is Not Acceptable)
2879 Deer Hound Way

City
Palm Harbor, FL **FL** Zip Code
34683

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

Anthony D. Salladin
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/23/02

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	PTD STOVER, MICHAEL J. 2175 CHAPARRAL WAY DUNEDIN FL ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SALLADIN, ANTHONY D 2879 DEER HOUND WAY PALM HARBOR FL 34683 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC SWAN, DAVID S., JR. 2364 SUNSET POINT RD CLEARWATER FL 33765 ☒ 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	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ☒ 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
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 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anthony D. Salladin
2/23/03 727783-6955
Date Daytime Phone #

CR2E034 (10/02)