

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J75651** (6)

1. Corporation Name

RAMETTA CORP.



Principal Place of Business

20401 NE 14TH AVENUE
MIAMI FL 33179

Mailing Address

20401 NE 14TH AVENUE
MIAMI FL 33179

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

RAMETTA, ANTHONY C
20401 N.W. 14TH AVENUE
MIAMI FL 33179

3. Date Incorporated or Qualified

06/03/1987

3a. Date of Last Report

05/01/1995

4. F.I. Number

59-2814439

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name **WILLIAM A. RAMETTA**

82 Street Address (P.O. Box Number is Not Acceptable)
20401 N.E. 14 AVE

83

84 City **MIAMI** FL 85 Zip Code **33179**

11. Pursuant to the provisions of Sections 607.0502 and 607.0504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

William A. Rametta

WILLIAM A. RAMETTA (D)

April 8-96

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	RAMETTA, ANTHONY C	
STREET ADDRESS	20401 N.E. 14TH AVENUE	
CITY-STATE-ZIP	MIAMI FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	RAMETTA, WILLIAM A	
STREET ADDRESS	20401 N.E. 14TH AVENUE	
CITY-STATE-ZIP	MIAMI FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	RAMETTA, PATRICIA A	
STREET ADDRESS	20401 N.E. 14TH AVENUE	
CITY-STATE-ZIP	MIAMI FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	RAMETTA, PATRICIA A.	
STREET ADDRESS	20401 NE 14 AVE.	
CITY-STATE-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11 TITLE	
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	V. CASSANDRA METCALF <input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	20401 NE 14 AVE
23 STREET ADDRESS	MIAMI, FL. 33179
24 CITY-STATE-ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	D. RAMETTA WILLIAM A. <input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	20401 NE. 14 AVE
43 STREET ADDRESS	MIAMI FL. 33179
44 CITY-STATE-ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 its 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

SIGNATURE:

William A. Rametta D.

April 8-96

305 461.3595

CR2E034 (12/95)