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

DOCUMENT #	1 97015
4 Compretion Name	

RAMP INDUSTRIES, INC.

EGERTON, CHARLES H

ORLANDO FL 32803

SUITE 1500

800 NORTH MAGNOLIA AVE.

Principal Place of Business	Mailing Address	
2110 EAST IRLO BRONSON HIGHWAY KISSRMIEE FL 34744-4415	2110 EAST IRLO KISSIMMEE FL 34	BRONSON HIGHWAY 1744-4415
2. Principal Place of Business	2a. Mailing Addre	
1]	26	
Suite, Apt. #, etc.	Súite, Apt. #,	elc.
2	27	
City & State	City & State	
3	28	
Zip Country	Zip	Country
4 25	29	30
9. Name and Address of Co	urrent Registered Agent	
		81

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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.

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84 City

SIGNATURE	Signature, typed or printed name of registered agent and till			
12.	OFFICERS AND DIR		Régistered Agent signature re 13.	-
TITLE	DP	[] DELETE	11 TITLE	
NAME	MORTON, ROGER W		1.2 NAME	
STREET ADDRESS			13 STREET ADDRESS	
CITY-ST-ZIP	ST. CLOUD FL 32769		14 CITY-ST-ZIP	
MUE	DTS	[] DELETE	2 1 TITLE	
NAME	MORTON, ALICE W		2.2 NAME	
STREET ADDRESS			23 STREET ADDRESS	
CITY-ST-ZNP	ST. CLOUD FL 32769		2 4 CiTY-ST-ZiP	
ITLE	DV	(_) DELETE	31THLE	
NAME	PENNELL, AMY M		3.2 NAME	
STREET ADDRESS	4545 MARKALL ALBAL -		3 3 STREET ADDRESS	
CATY-ST-ZIP	KISSIMMEE FL 34744		34 CiTY-ST-Ziº	
TITLE	DV	[] DELETE	4 1 TITLE	
NAME	MORTON, ALUSON M		4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32837		4.4 City-ST-ZiP	
TITLE		[] DELETE	5 1 TIFLE	
VAME			5.2 NAME	
STREET ADDRESS			53 STREET ADORESS	
CITY-ST-ZIP			54 CITY-ST-ZIP	
TITLE		☐ DELETE	61 TITLE	
AME .			6.2 NAME	
STREET ADDRESS			63 STREET ADDRESS	

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SECRETARD OF STATE	
TÀTIAHASSEE, FLORIDA	

	DO NOT WRITE IN THIS	SPACE
	3. Date Incorporated or Qualified 08/29/1990	
	4. FEI Number 65-0220667	Applied For Not Applicabl
	5. Certificate of Status Desired []	\$8.75 Additional Fee Required
•	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	This corporation owes the current year Inta Personal Property Tax	angible Yes []No
Name	10. Name and Address of New Registered A	Agent
Street Ad	ddress (P.O. Box Number is Not Acceptable)	
City	Fi	85 Zip Code

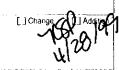
DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

2000002867 -05707/990 ****550,00	111184	102
· · · · · · · · · · · · · · · · · · ·	[] Change	Addition

[] Change	Addition

[]Change []Addition

[] Change	[]] Addition



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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 logal effect as if made under oath, that I am an officer or director of the corporation or the eceiver 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 extendment with an address with all given like empowered.

SIGNATURE: