## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000005328

Entity Name: RAM CHEERLEADER BOOSTERS, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8865 SW 16 STREET MIAMI, FL 33165

Current Mailing Address: New Mailing Address:

3001 SW 3 AVE 2311 SW 83 AVENUE MIAMI, FL 33129 MIAMI, FL 33155 US

FEI Number: 20-0054037 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 KATE MAS, SARA
 WILTZ, OFELIA

 3001 SW 3 AVE
 2821 SW 100 AVENUE

 MIAMI, FL 33129
 MIAMI, FL 33165
 US

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.

SIGNATURE: OFELIA WILTZ 04/27/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 ZAYAS-BAZAN, CRYPSY
 Name:
 BLANCO, BARBARA

 Address:
 7910 SW 17TH TER
 Address:
 2311 SW 83 AVENUE

 City-St-Zip:
 MIAMI, FL 33155
 City-St-Zip:
 MIAMI, FL 33155 US

Title: TD ( ) Delete Title: VPD (X) Change ( ) Addition Name: MAS, SARA KATE Name: GARCIA, ANA

 Address:
 9635 SW 10TH TERR
 Address:
 1900 SW 86 AVENUE

 City-St-Zip:
 MIAMI, FL 33174
 City-St-Zip:
 MIAMI, FL 33155 US

 $\label{eq:title:title:title:total} \textit{Title:} \qquad \textit{VPD} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{TD} \qquad \textit{(X)} \; \textit{Change ()} \; \textit{Addition}$ 

 Name:
 LORENZO, LENIA
 Name:
 WILTZ, OFELIA

 Address:
 7330 NW 4TH STREET
 Address:
 2821 SW 100 AVENUE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33165 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA BLANCO PD 04/27/2005