


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 31, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # N03000005328		
1. Entity Name RAM CHEERLEADER BOOSTERS, INC.		
Principal Place of Business 8865 SW 16 STREET MIAMI, FL 33165	Mailing Address 8675 SW 29 ST MIAMI, FL 33155 US	



07262007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-0054037	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  RODRIGUEZ, MELBA 8675 SW 29 ST MIAMI, FL 33155
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25  
Due by September 14, 2007**

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	PD ALVAREZ, MARIBEL 9240 SW 19 ST MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD PONTE, ANA 2425 SW 80 AVENUE MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD RODRIGUEZ, MELBA 8675 SW 29 ST MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S GUTIERREZ, DIXIE 8330 SW 13 TERR MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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: \_\_\_\_\_

*Melba Rodriguez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-26-07 305-781-5798  
Date Daytime Phone #