

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

1 of 2

DOCUMENT # N03000009681

1. Entity Name

ROMA AND FRIENDS FOUNDATION, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JAN 18 PM 2:47

5/24/04 90009 003 \$61.25



MOORE CR2E037 (11/03)

Principal Place of Business

9701 MARTINIQUE DRIVE
MIAMI FL 33189

Mailing Address

9701 MARTINIQUE DRIVE
MIAMI FL 33189

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

450527919

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAMBARRAN, ROMATEE
9701 MARTINIQUE DRIVE
MIAMI FL 33189

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
RAMBARRAN, ROMATEE
9701 MARTINIQUE DR
MIAMI, FL 33189 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
RAMBARRAN, CLYDE
9701 MARTINIQUE DR
MIAMI, FL 33189 ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
900045212429
01/24/05--01012--019 **\$61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
REINSTATEMENT 04-05

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 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: Romatee L Rambarran
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/12/2004
Date Daytime Phone #

May 26, 2004

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ROMA AND FRIENDS FOUNDATION, INC.
9701 MARTINIQUE DRIVE
MIAMI, FL 33189

SUBJECT: ROMA AND FRIENDS FOUNDATION, INC.
Ref. Number: N03000009681

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report has not been filed and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box.

+ NEXT, - PREV, 1. MENU, 2. FILING, 4. EVENTS
7. LIST
ENTER SELECTION AND CR:

TO IRS.

I REFER TO YOUR LETTER DATED 1/3/05
~~AND REQUEST~~ THE LETTER SHOWN
ABOVE WAS NEVER RECEIVED BY
US.

I AM RETURNING THE CHECK AS WELL
AS ALL THE CORRESPONDENCE AND
REQUEST YOU REINSTATE THE
CORPORATION AS SOON AS POSSIBLE.

Ramatee L. Rambarran
President