

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # N03000009681

1. Entity Name
ROMA AND FRIENDS FOUNDATION, INC.



Principal Place of Business
**9701 MARTINIQUE DRIVE
MIAMI, FL 33189**

Mailing Address
**9701 MARTINIQUE DRIVE
MIAMI, FL 33189**



02212006 No Chg-NP CR2037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **45-0527919** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RAMBARRAN, ROMATEE
9701 MARTINIQUE DRIVE
MIAMI, FL 33189**

**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 reissuing) DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **RAMBARRAN, ROMATEE**
STREET ADDRESS **9701 MARTINIQUE DRIVE**
CITY-ST-ZIP **MIAMI, FL 33189**

TITLE **D**
NAME **RAMBARRAN, CLYDE**
STREET ADDRESS **9701 MARTINIQUE DRIVE**
CITY-ST-ZIP **MIAMI, FL 33189**

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04/18/2006 100681-005 61.25

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

2/22/06 3052333814
Date Daytime Phone #