

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90146 016 ***558.75

DOCUMENT # P00000034947

1. Entity Name
RAM RATTAN, INC.

Principal Place of Business 5555 MINERAT CT. ORLANDO FL 32821	Mailing Address 5555 MINERAT CT. ORLANDO FL 32821
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2. Principal Place of Business 131 Bianca Court	3. Mailing Address 131 Bianca Court
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Kissimmee Florida	City & State Kissimmee Florida	4. FEI Number 59-3637263	Applied For Not Applicable
Zip 34758	Country Osceola	Zip 34758	Country Osceola



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent RATTAN, RESHE 5555 MINERAT CT. ORLANDO FL 32821		7. Name and Address of New Registered Agent Name Rattan Reshe Street Address (P.O. Box Number is Not Acceptable) 131 Bianca Court City Kissimmee FL Zip Code 34758	
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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.

SIGNATURE *Reshe Rattan*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME D RATTAN, RESHE	<input checked="" type="checkbox"/> Delete	TITLE NAME P RATTAN, RESHE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 5555 MINERAT CT.		STREET ADDRESS 131 Bianca Court	
CITY-ST-ZIP ORLANDO FL 32821		CITY-ST-ZIP Kissimmee FL 34758	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Reshe Rattan*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-11-01
 Date

(407)466-8593
 Daytime Phone #

CR2E034 (10/00)