

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P0000082486

1. Entity Name
RAMBOZE, INC.



Principal Place of Business
8022 STIMIE AVE NO.
SAINT PETERSBURG, FL 33710

Mailing Address
8022 STIMIE AVE NO.
SAINT PETERSBURG, FL 33710



01312008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|-----------------------------------|
| 4. FEI Number 59-3673740 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

8. Name and Address of Current Registered Agent

BOZEMAN, WILLIAM O III
8022 STIMIE AVE NO.
S
SAINT PETERSBURG, FL 33710

**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.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$350.00**

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

006000842664
03/11/08-90030-003 150.00

10. OFFICERS AND DIRECTORS

| | |
|----------------|----------------------------|
| TITLE | CCEO |
| NAME | BOZEMAN, WILLIAM O III |
| STREET ADDRESS | 8022 STIMIE AVE N |
| CITY-ST-ZIP | SAINT PETERSBURG, FL 33710 |

| | |
|----------------|----------------------------|
| TITLE | SEC |
| NAME | BOZEMAN, SANDRA |
| STREET ADDRESS | 8022 STIMIE AVE NO |
| CITY-ST-ZIP | SAINT PETERSBURG, FL 33710 |

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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 607, 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: William O. Bozeman III WILLIAM O. BOZEMAN III 2/25/08 727-343-6005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #