## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000093909

Entity Name: TRAM DEVELOPMENT, INC.

4990 ROTHSCHILD DR

CORAL SPRINGS, FL 33067

Address:

City-St-Zip:

FILED Feb 06, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4990 ROTHSCHILD DR 4990 ROTHSCHILD DR CORAL SPRINGS, FL 33215 CORAL SPRINGS, FL 33067 **Current Mailing Address: New Mailing Address:** P.O. BOX 8922 CORAL SPRINGS, FL 33075 FEI Number: 65-1051001 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FABIAN, ROBERT S 616 NE 17TH TERR FORT LAUDERDALE, FL 33304 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FABIAN, ROBERT S Name: Name: 616 NE 17TH TERR Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: Title: Title: () Change () Addition () Delete LUSARARIAN, ARAM Name: Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT S FABIAN **PRES** 02/06/2004