

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000063307

Entity Name: RING ENTERPRISES, INC.

FILED  
Feb 08, 2005  
Secretary of State

## Current Principal Place of Business:

255 ALHAMBRA CIRCLE  
720  
MIAMI, FL 33134

## New Principal Place of Business:

20816 NE 32ND AVE  
AVENTURA, FL 33180

## Current Mailing Address:

20816 NE 32ND AVE  
AVENTURA, FL 33180

## New Mailing Address:

FEI Number: 65-1119859      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RING, RONALDO V  
20816 NE 32ND AVE  
AVENTURA, FL 33180      US

## Name and Address of New Registered Agent:

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:

Title: DP      ( ) Delete  
Name: RING, RONALDO VICTOR  
Address: 20816 NE 32ND AVE  
City-St-Zip: AVENTURA, FL 33180

Title: DV      ( ) Delete  
Name: MAYO DE RING, GRACIELA L  
Address: 20816 NE 32ND AVE  
City-St-Zip: AVENTURA, FL 33180

Title: DST      ( ) Delete  
Name: RING DE CASOY, LAURA N  
Address: 20816 NE 32ND AVE  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
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: GRACIELA L.MAYO DE RING

D

02/08/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date