2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P0100067752 1. Entity Name RAYMARK INTERNATIONAL INC. Principal Place of Business 1413 COURSE VIEW DR ORANGE PARK, FL 32003 Mailing Address 1413 COURSE VIEW DR ORANGE PARK, FL 32003

FILED Jan 29, 2008 8:00 am Secretary of State

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¢o	75	
59-3730689		Not Applicable
4. FEI Number	Ĭ.,	Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

ROTH, MARK S 1413 COURSE VIEW DR

6. Name and Address of Current Registered Agent

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No Chg-P

ORANGE	PARK, FL 32003			IN '	THIS SPACE	
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered	office or r	egistered agent, or be	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered A	igent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ROTH, MARK S 1413 COURSE VIEW DR ORANGE PARK, FL 32003		DO NOT WRITE			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated	certify that the information supplied with this fi	iling does not qualify for the exen	nptions cor	ntained in Chapter 11	19, Florida Statutes. I further certify that the information act as if made under path; that I am an officer or director	

12. I hereby certify that the information supplied with this filling 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:

March S. Roth
PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/08 904-278-8787 David Daysine Phone #