## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000074318

City-St-Zip:

BOCA RATON, FL 33433

FILED Apr 23, 2007 Secretary of State

Entity Nar	ne: RAMARK	(INTERNATIONAL, INC.					
Current Principal Place of Business:			New Pri	New Principal Place of Business:			
2298 NW 2ND AVE. SUITE 11 BOCA RATON, FL 33431			204	6417 LA COSTA DRIVE 204 BOCA RATON, FL 33433			
Current Mailing Address:				New Mailing Address:			
2298 NW 2ND AVE. SUITE 11 BOCA RATON, FL 33431			SUITE 1	45 TUDOR CITY PLACE SUITE 1020 NEW YORK, NY 10017			
FEI Number:	65-1138827	FEI Number Applied For ( )	FEI Number Not Ap	oplicable ( )	Certificate of Status Desired	()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
6417 LA Co 204	DE CONTO, OSTA DRIVE FON, FL 3343						
The above in the State		submits this statement for the pu	rpose of changing	g its registered	d office or registered agent, c	or both,	
SIGNATUR	RE:						
	Electror	nic Signature of Registered Ager	nt		Date		
Election Can	npaign Financin	g Trust Fund Contribution ( ).					
OFFICERS	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DIR ( ) DE CONTO, MA 6417 LA COST BOCA RATON,	A DRIVE #204	Title: Name: Address: City-St-Zip	c c	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	DIR ( ) DE CONTO, MI 6417 LA COST BOCA RATON,	A DRIVE #204	Title: Name: Address: City-St-Zip	6417 LA CÓ	(X) Change ( ) Addition MICHELLE J STA DRIVE #204 N, FL 33433		
Title: Name: Address:		) Delete CONTO, ADAIR A DRIVE. #204	Title: Name: Address:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: MICHELLE DE CONTO VΡ 04/23/2007