

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 16, 2002 8:00 am**  
**Secretary of State**

07-16-2002 90356 045 \*\*\*150.00

**DOCUMENT # P01000092382**

1. Entity Name  
**RAMA-RAMA IMPORTS, INC.**

Principal Place of Business  
**5086 MYRTLE LANE NORTH**  
**ST PETERSBURG FL 33708**

Mailing Address  
**5086 MYRTLE LANE NORTH**  
**ST PETERSBURG FL 33708**

2. Principal Place of Business  
**15506 US HWY 19**

3. Mailing Address  
**15506 US HWY 19**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**HUDSON, FL**

City & State  
**HUDSON, FL**

Zip  
**34667**

Country  
**USA**

Zip  
**34667**

Country  
**USA**

4. FEI Number  
**593741376**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**LOVELACE, WILLIAMS K ESQ**  
**401 S LINCOLN AVE**  
**CLEARWATER FL**

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

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

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CARR, ERIC</b> <b>5086 MYRTLE LANE NORTH</b> <b>ST PETERSBURG FL 33708</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CARR, ERIC</b> <b>15506 US HWY 19</b> <b>HUDSON, FL 34667</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E034 (4/02)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED CARR**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/02

(727) 863-4737



*Attachment P01000092382*  
*120804*  
**Rama-Rama Imports Inc.**

15506 US Highway 19, Hudson, FL 34667-3613, Tel: (727) 863-4737, Fax: (727) 863-0469

9 July 2002

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

**Re: Waiver of Late Fee, Uniform Business Report Document # P01000092382**

Dear Sirs,

We write to request waiver of the late filing fee for our Uniform Business Report bearing document number P01000092382.

We hereby affirm that the corporation did not receive prior notice.

Please find enclosed our completed UBR together with the original \$150.00 filing fee.

Sincerely,

Eric A. Carr  
Director  
Rama-Rama Imports, Inc.