

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000092632

Entity Name: RAMIREZ SOD, CORP.

FILED
Jul 02, 2008
Secretary of State

Current Principal Place of Business:

14932 CTY LINE RD
SPRING HILL, FL 346106005

New Principal Place of Business:

14932 COUNTY LINE RD. LINE RD
SPRING HILL, FL 346106005

Current Mailing Address:

14932 CTY LINE RD
SPRING HILL, FL 346106005

New Mailing Address:

14932 COUNTY LINE RD. LINE RD
SPRING HILL, FL 346106005

FEI Number: 04-3613771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, MANUEL
17529 CHORVAT AVE.
SPRING HILL, FL 346106005 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAMIREZ, MANUEL
Address: 17529 CHORVAT AVE.
City-St-Zip: SPRING HILL, FL 346106005

Title: V () Delete
Name: GARCIA, YECENIA R
Address: 2005 ELMWOOD AVE
City-St-Zip: TAMPA, FL 33605

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V () Change (X) Addition
Name: BACA, JOSEFINA
Address: 21240 COUNTY LINE RD.
City-St-Zip: SPRING HILL, FL 34610 US

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

SIGNATURE: MANUEL RAMIREZ

P

07/02/2008

Electronic Signature of Signing Officer or Director

Date