

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90091 042 ***150.00

DOCUMENT # **P01000119785**

1. Entity Name
RAM INVESTMENT GROUP, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
19001 N.E. 14 Ave.

3. Mailing Address
19001 N.E. 14 Ave

Suite, Apt. #, etc.
308

Suite, Apt. #, etc.
308

DO NOT WRITE IN THIS SPACE

City & State
N. MIAMI BCH FL

City & State
N. MIAMI BCH FL

4. FEI Number
010566386

Applied For
Not Applicable

Zip
33179

Country
DADE

Zip
33179

Country
DADE

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
LEONID PANKOV

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

19001 N.E. 14 Ave # 308

City **N. MIAMI BCH FL** Zip Code **33179**

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.

SIGNATURE  **LEONID PANKOV MANAGING DIRECTOR 01-28-2003**

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)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGING DIRECTOR - M
LEONID PANKOV
19001 N.E. 14 Ave #308
N. MIAMI BCH, FL 33179**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **LEONID PANKOV**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-28-2003 3054914904

Date

Daytime Phone #

CR2E034B (12/01)