

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91463 004 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000053530			
1. Entity Name RAMCO SERVICES INC.			
Principal Place of Business 4992 SW 95 AV COOPER CITY, FL 33328		Mailing Address 4992 SW 95 AV COOPER CITY, FL 33328	
2. Principal Place of Business 4992 SW 95 AV Cooper City, FL 33328 Broward		3. Mailing Address 4992 SW 95 AV Cooper City 33328 Broward	
		4. FEI Number 20-0002357	Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KELLY, PATRICK W 4992 SW 95 AV COOPER CITY, FL 33328		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: <i>N/A</i> Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent Signature required when submitting)			
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Patrick W. Kelly</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <i>4/25/03</i> Daytime Phone # <i>954-663-4010</i>	

CR2E034 (10/02)