2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000119950

Entity Name: RAM MANAGEMENT ENTERTAINMENT, INC.

516 ORANGE DRIVE, SUITE 26

ALTAMONTE SPRINGS, FL 32701

Address: City-St-Zip: FILED Apr 22, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
516 ORAN SUITGE 26 ALTAMON		;, FL 32701			
Current Mailing Address:			New Mailing Address:		
516 ORAN SUITGE 26 ALTAMON		; FL 32701			
FEI Number:	06-1660105	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
1840 SW 2 4TH FLOO		.A.			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	POWELL, RO 516 ORANGE) Delete YCE L DRIVE, SUITE 26 SPRINGS, FL 32701	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ELDER, MICH 516 ORANGE) Delete AEL J DRIVE, SUITE 26 SPRINGS, FL 32701	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	STD (WANG, HUI) Delete	Title: Name:	() Change () Addition	

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

Address:

City-St-Zip:

SIGNATURE: ROYCE POWELL PD 04/22/2003