

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000038085

FILED
Aug 26, 2007
Secretary of State**Entity Name:** RAMADAN INCORPORATED**Current Principal Place of Business:**8230 DAMES POINT CROSSING BLVD.
SUITE 1706
JACKSONVILLE, FL 32277 US**New Principal Place of Business:**8230 DAMES POINT CROSSING BLVD.
SUITE 1708
JACKSONVILLE, FL 32277 US**Current Mailing Address:**8230 DAMES POINT CROSSING BLVD.
SUITE 1706
JACKSONVILLE, FL 32277 US**New Mailing Address:**8230 DAMES POINT CROSSING BLVD.
SUITE 1708
JACKSONVILLE, FL 32277 US**FEI Number:** 20-2506206**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RAMADAN, KHALED
RAMADAN INCORPORATED
8230 DAMES POINT CROSSING BLVD., STE. 1706
JACKSONVILLE, FL 32277 US**Name and Address of New Registered Agent:**RAMADAN, KHALED
RAMADAN INCORPORATED
8230 DAMES POINT CROSSING BLVD., STE. 1708
JACKSONVILLE, FL 32277 US

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:

08/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PRES () Delete
Name: RAMADAN, KHALED
Address: 8230 DAMES POINT CROSSING BLVD.
City-St-Zip: JACKSONVILLE, FL 32277 US**Title:** SECR (X) Delete
Name: RAMADAN, MUHANAD
Address: 8230 DAMES POINT CROSSING BLVD.
City-St-Zip: JACKSONVILLE, FL 32277 US**Title:** TREA (X) Delete
Name: RAMADAN, BASSEL
Address: 8230 DAMES POINT CROSSING BLVD.
City-St-Zip: JACKSONVILLE, FL 32277 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PRES (X) Change () Addition
Name: RAMADAN, KHALED
Address: 8230 DAMES POINT CROSSING BLVD., STE. 1708
City-St-Zip: JACKSONVILLE, FL 32277 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: KHALED RAMADAN

PRES

08/26/2007

Electronic Signature of Signing Officer or Director

Date