## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 05, 2007 8:00 am Secretary of State

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		RAMING CORPORATION						
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	128 PINE TER		128 PINE TERR			4005096	U	
	INTERLACHEN		INTERLACHEN, FL 3214	8		4000		
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		ace of Business No. P.O. Box	3. Mailing Address V	943				
	Suite, Apt.	<del></del>	Suite, Apt. #, etc.	<u>, y ke</u>	01172007	Chg-P	CR2E034 (12/06)	
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ŀ	ALLEY P	Junam	32148	Putnal	5. Certificate	of Status Desired	□ \$8.75 Add Fee Require	
Ī		6. Name and Address of Current	Registered Agent		7. Name and	Address of New R	tegistered Agent	
ļ	KERCE, AI	LICIA		Name				
l	128 PINE T			Street Add	dress (P.O. Box Number	er is Not Alcaptable	"Rda	
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		named entity submits this statement to	or the purpose of changing its re		がこれ egistered agent, or bo	th, in the State of Flo	orida. I am familiar with,	and accept
	the obligati	named entity submits this statement for ions of registered agent.	or the purpose of changing its re		egistered agent, or bo	Cheh th, in the State of Flo	orida. I am familiar with,	and accept
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

STREET ADDRESS CITY-ST-ZIP

NAME

SIGNATURE: \_

NAME

STREET ADDRESS

CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-021

1-38L)684-089