2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000107944

Entity Name: SK. RAMAN, P.A.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

201 PLANTATION CLUB DRIVE

APT. 1606

MELBOURNE, FL 32940 US

Current Mailing Address: New Mailing Address:

201 PLANTATION CLUB DRIVE 4755 DOREEN ROAD APT. 1606 COCOA, FL 32927 US

MELBOURNE, FL 32940 US

FEI Number: 26-3874751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMAN, SIVAKUMAR
201 PLANTATION CLUB DRIVE
MELBOURNE, FL 32940 US
RAMAN, SIVAKUMAR
4755 DOREEN ROAD
COCOA, FL 32927 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: SIVAKUMAR RAMAN 04/01/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

Name:RAMAN, SIVAKUMARName:RAMAN, SIVAKUMARAddress:201 PLANTATION CLUB DRIVE, APT. 1606Address:4755 DOREEN ROADCity-St-Zip:MELBOURNE, FL 32940 USCity-St-Zip:COCOA, FL 32927 US

Title: SECR () Delete Title: SECR (X) Change () Addition

Name:RAMAN, SIVAKUMARName:RAMAN, SIVAKUMARAddress:201 PLANTATION CLUB DRIVE, APT. 1606Address:4755 DOREEN ROADCity-St-Zip:MELBOURNE, FL 32940 USCity-St-Zip:COCOA, FL 32927 US

Title: TREA () Delete Title: TREA (X) Change () Addition

 Inte:
 I REA
 () Delete
 I Inte:
 I REA
 (X) Change () Addition

 Name:
 RAMAN, SIVAKUMAR
 Name:
 RAMAN, SIVAKUMAR

 Address:
 201 PLANTATION CLUB DRIVE, APT. 1606
 Address:
 4755 DOREEN ROAD

 City-St-Zip:
 MELBOURNE, FL 32940 US
 City-St-Zip:
 COCOA, FL 32927 US

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: SIVAKUMAR RAMAN PRES 04/01/2009