

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra L. Worham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

2000-1 11 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000015314 (6)

1. Corporation Name:

REALTY RAMA, INC.

Principal Place of Business:

P.O. BOX 1743
WINDERMERE FL 34786-1743

Mailing Address:

P.O. BOX 1743
WINDERMERE FL 34786-1743

DO NOT WRITE IN THIS SPACE

3. Date of Corporation or Change of:	3a. Date of Last Report
02/22/1993	06/16/1994
4. FEI Number	Applied For
59-3171664	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
8. This corporation has liability for equitable tax under 1990 U.S. Florida Statutes	☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21. State: Apt. # etc.	26. State: Apt. # etc.
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
25. City & State	30. City & State

9. Name and Address of Current Registered Agent

PERSAUD, K D
1137 31ST ST.
ORLANDO FL 32806

10. Name and Address of New Registered Agent

B1. Name
B2. Street Address (P.O. Box Number is Not Acceptable)
B3. City
B4. City
B5. Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1501, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.1501, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent Accepting Appointment)

(Signature of Registered Agent or Registered Agent Accepting Appointment)

(Signature of Registered Agent or Registered Agent Accepting Appointment)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	PD	1. TITLE	☐ Change ☐ Addition
2. NAME	PERSAUD, K D	2. NAME	
3. STREET ADDRESS	1137 31ST ST.	3. STREET ADDRESS	
4. CITY, ST, ZIP	ORLANDO FL	4. CITY, ST, ZIP	
5. TITLE		5. TITLE	☐ Change ☐ Addition
6. NAME		6. NAME	
7. STREET ADDRESS		7. STREET ADDRESS	
8. CITY, ST, ZIP		8. CITY, ST, ZIP	
9. TITLE		9. TITLE	☐ Change ☐ Addition
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY, ST, ZIP		12. CITY, ST, ZIP	
13. TITLE		13. TITLE	☐ Change ☐ Addition
14. NAME		14. NAME	
15. STREET ADDRESS		15. STREET ADDRESS	
16. CITY, ST, ZIP		16. CITY, ST, ZIP	
17. TITLE		17. TITLE	☐ Change ☐ Addition
18. NAME		18. NAME	
19. STREET ADDRESS		19. STREET ADDRESS	
20. CITY, ST, ZIP		20. CITY, ST, ZIP	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

607
291-6501
Tallahassee, FL