

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000035892

Entity Name: RAS ENTERPRISES, INC.

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

6885 NW 25TH STREET
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

231 ALTARA AVENUE
CORAL GABLES, FL 33146

New Mailing Address:

8347 SW 40 ST
MIAMI, FL 33155

FEI Number: 65-0417562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARANGO, ALVARO
12251 SW 96TH STREET
MIAMI, FL 33186

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: ARANGO, ANA E
Address: 6885 NW 25 ST.
City-St-Zip: MIAMI, FL 33122

Title: P () Delete
Name: ARANGO, ALVARO
Address: 6885 NW 25 CT.
City-St-Zip: MIAMI, FL 33122

Title: ST () Delete
Name: ARANGO, NATALIA M
Address: 6885 N.W. 25 ST
City-St-Zip: MIAMI, FL 33122

Title: S () Delete
Name: ARANGO, JUAN C
Address: 6885 NW 25 CT
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: ALVARO ARANGO

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date