

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra D. Mentzer
Secretary of State
DIVISION OF CORPORATE FILINGS

**APPROVED
AND
FILED**

95 MAY -1 AM 4: 37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000042177 (4)

T. CORPORATION NAME

RAMPAD, INC.

Principal Place of Business
**11420 PEACHTREE DRIVE
N MIAMI FL 33161**

Mailing Address
**11420 PEACHTREE DRIVE
N MIAMI FL 33161**

(Do Not Write In This Space)

3. Date Reported or Qualified 06/15/1993	3a. Date of Last Report 03/28/1994
4. FET Number 65-0434852	Appeal For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaigns Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. Does corporation have authority to change its name or alter its Florida Statutes ☐ Yes ☒ No	

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

9. Name and Address of Current Registered Agent

**FEINSTEIN, BRETT
407 LINCOLN ROAD
SUITE 2B
MIAMI BEACH FL 33139**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number or Post Office Box)	
83.	
84. City	FL 85. Zip Code

11. Pursuant to the provisions of Sections 601.01(1) and 601.17(1), Florida Statutes, the above named corporate filer, by this statement for the purpose of changing its registered office or registered agent or both in the State of Florida, such change was authorized by the corporation's board of directors, thereby, accept the appointment as registered agent. I am familiar with and accept the provisions of Sections 601.01(1) and 601.17(1), Florida Statutes.

SIGNATURE

(Signature must be printed and typed on this page.)

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12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	D PERSAUD, RAMESH 11420 PEACHTREE DRIVE N MIAMI FL 33161	NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	☐ Change ☐ Addition
NAME	D PERSAUD, PADMINI 11420 PEACHTREE DRIVE N MIAMI FL 33161	NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	☐ Change ☐ Addition
NAME	D PERSAUD, DHANESH 11420 PEACHTREE DRIVE N MIAMI FL 33161	NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	☐ Change ☐ Addition

14. I, the filer, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 601.01(1) and 601.17(1), Florida Statutes. I further certify that the information supplied on this annual report or supplemental annual report is true and accurate and that my signature shall cause the same to be filed as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to make this report as required by Chapter 601, Florida Statutes, and that my name appears in Block 1, or Block 1a (if changed) or in an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/95

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