## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000056685

Entity Name: RAYMATT DEVELOPMENT CORP.

FILED Feb 26, 2008 Secretary of State

| Current Principal Place of Business:                          |                                | New Principal Place of                | New Principal Place of Business:             |  |
|---|--------------------------------|---------------------------------------|--|--|
| 1021 HILLSBORO MILE<br>SUITE 1007<br>HILLSBORO BEACH, FL      | 33062 US                       |                                       |  |  |
| Current Mailing Address:                                      |                                | New Mailing Address:                  | New Mailing Address:                         |  |
| 1021 HILLSBORO MILE<br>SUITE 1007<br>HILLSBORO BEACH, FL      | 33062 US                       |                                       |  |  |
| FEI Number: 65-0428902  | FEI Number Applied For ( )     | FEI Number Not Applicable ( )         | Certificate of Status Desired ( )            |  |
| Name and Address of C   | urrent Registered Agent:       | Name and Address of I                 | ne and Address of New Registered Agent:      |  |
| STRIAR, MICHAEL P<br>3864 SHERIDAN ST.<br>HOLLYWOOD, FL 33021 | 1 US                           |                                       |  |  |
| The above named entity s<br>in the State of Florida.          | submits this statement for the | purpose of changing its registered of | office or registered agent, or both,         |  |
| SIGNATURE:  |                                |                                       |  |  |
| Electronic Signature of Registered Agent                      |                                | gent                                  | Date   |  |
| Election Campaign Financing                                   | g Trust Fund Contribution ( ). |                                       |  |  |
| OFFICERS AND DIRECT   | TORS:                          | ADDITIONS/CHANGES                     | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title: P () Name: LYONS, MICHAE                               | Delete<br>FI                   | Title: (<br>Name:                     | ) Change ()Addition                          |  |

 Name:
 LYONS, MICHAEL
 Name:

 Address:
 1021 HILLSBORO MILE, SUITE 1007
 Address:

 City-St-Zip:
 HILLSBORO BEACH, FL 33062
 City-St-Zip:

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: MICHAEL LYONS PRES 02/26/2008