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Secretary of State

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**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P93000065043

Corporation Name
RAM COMPUTERS, INC.

Principal Place of Business

11 S.W. 138TH PLACE
 AMI FL 33175

Mailing Address

4804 S.W. 138TH PLACE
 MIAMI FL 33175

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

09/17/1993

4. FEI Number

65-0436876

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be
Added to Fees

7. This corporation owes the current year intangible
 Personal Property Tax.

☐

Yes

☐

No

Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

9. Name and Address of Current Registered Agent

TREJOS, MARIA A
 4804 S.W. 138TH PLACE
 MIAMI FL 33175

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent (and title if applicable)

(NOTE: Registered Agent signature required when substituting)

04-01-99

OFFICERS AND DIRECTORS

1. NAME	2. ADDRESS	3. CITY-STATE-ZIP	4. DELETE
TREJOS, MARIA A	4804 S.W. 138TH PLACE	MIAMI FL 33175	☐
MORA, EDGAR A	4804 S.W. 138TH PLACE	MIAMI FL 33175	☐
SANOJA, EDGAR E	4804 S.W. 138TH PLACE	MIAMI FL 33175	☐
			☐
			☐
			☐

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-STATE-ZIP
 2.1 TITLE
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-STATE-ZIP
 3.1 TITLE
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-STATE-ZIP
 4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-STATE-ZIP
 5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-STATE-ZIP
 6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-STATE-ZIP

☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information disclosed on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

NATURE: *Maria Trejos*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99 (3a) 227-9667
 Date Daytime Phone

CR2E034 (1/98)