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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1. Corporation	on Name	00066798 (B)		
RAM INTERNATIONAL COMPUTER, INC. Principal Place of Business Mailing Address 4750 N.E. 11TH AVE. FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334					
FI. LAUDE	HUALE PE 33334	FI. LAUDENDALE FI	. 33334	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal F	Place of Business	2a, Mailing Address		09/24/1993 4. FEI Number	09/28/1995 Applied For
1]		26		65-0439231	Not Applicable
Surte, Apt.	·	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat 3	te	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7(n 4	Country 25	2 ip 29	Country 30		⊌ ™o
	g. Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
1201 F	Dration Service Company Hays St. Hassee FL 32301		82 Street Add 83	ress (P.O. Box Number is Not Acceptable)
			84 City		FL 85 Zip Code
familiar w	Pedia Jerit, or both, in the State of Fi Ath, and accept the obligations of S Square type to print the name of registering	orida: Such change was author ection 607.0505, Florida Statute	ized by the corporation is boa 95. (OT:: Registered Agent signature require		ntment as registered agent. I am
12. Ithe	DPST	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
NAME STREET ADDRESS	PAGANO, DON 3100 NE 56TH CT. FT LAUDERDALE FL 3330	<u> </u>	1.2 NAME 1.3 STREET ADDRESS		
CITY - ST - ZIP TITLE	V	DELETE	1.4 C(TY - ST - ZIP 2 1 TITLE		Change Addition
NAME STREET ADDRESS	MILON, TINA 3100 NE 56TH CT.		2 ? NAME 2 3 STREET ADDRESS		
CHY ST ZO	FT LAUDERDALE FL 3330	8	2 4 CITY · ST - ZIP		
T:ILE NAME		DELETE	3. 1 TITLE 32 NAME		☐ Change ☐ Addition
STREET ADDRESS			3.3 STREET ADDRESS		
ÇITY-S³-ZIP Tille		DE; ETE	3.4 CITY - ST - ZIP		C) Change C Addi-
THE NAME STREET ADDRESS		בן טנונוני	4 1 TITLE 4.2 NAME		Change Addition
CITY-ST-7IP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
In u		☐ DELFTE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ACTORESS			5.3 STREET ADDRESS		
CITY ST ZIP TM:E	 	DELETE	5.4 City - ST - ZIP		□ Phanas □ Addition
NAME			6 1 TITLE 62 NAME		Change Addition
STREET ADDRESS			63 STREET ADDRESS		
CITY OF 210			5 4 9 7 9 7 7 7 7 7 7 9		

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated 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 cath, 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 change1, or or an attachment with an address.

SIGNATURE:

DOR PRINTED NAME OF SIGNING

305-176-3450