

FILED  
May 12 1997 8:00am  
Secretary of State



1. Corporation Name  
**RAMBA PLUS, INC.**

**Mailing Address**  
**720 SOUTH WEST 6TH STREET**  
**DANIA FL 33004-4906**

2. Principal Place of Business		2a. Mailing Address		3a. Date of Last Report	
21	720 SW 6th St.	26	720 SW 6th St.	10/24/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01/10/1997	
22	Dania Fla	27	Dania -	4. FEI Number 65-0719610	
City & State		City & State		APPLIED FOR	
23	33004, Broward	28	Fla.	5. Certificate of Status Desired NO	
Zip		Zip		\$8.75 Additional Fee Required	
24	33004	29	33004	6. Election Campaign Financing NO	
25	Broward	30	Broward	\$5.00 May Be Added to Fees	
Country		Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

WALTON, COSTELL JR.  
2480 NORTH ANDREWS AVENUE  
FORT LAUDERDALE FL 33311

81	Name	<b>Not Applicable</b>
82	Street Address (Post Box Number is Not Acceptable)	
83		
84	City	
		FL 85 Zip Code

11. 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 reinstating)

DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PSTD</b>	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>HIGGS, ANDREW E</b>	1.2 NAME	
STREET ADDRESS	<b>720 SOUTH WEST 6TH STREET</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>DANIA FL 33004</b>	1.4 CITY - ST - ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 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.

SIGNATURE: *A E Higgs* Andrew E Higgs/President 1-954-925-2701

CR2E034 (9/96)