


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000081506 (4)

1. Corporation Name
RAMBA PLUS, INC.

Principal Place of Business

720 SOUTH WEST 6TH STREET
DANIA FL 33004
US

Mailing Address

720 SOUTH WEST 6TH STREET
DANIA FL 33004
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 720 SW 6th St		26 720 SW 6th St		10/24/1995	
22 Dania Fla		27 Dania Fla		4. FEI Number	
23 33004 Broward		28 33004 Broward		65-0719610	
24 33004		29 33004		5. Certificate of Status Desired	
25 Broward		30 Broo		N/A	
e. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	
WALTON, COSTELL JR. 2480 NORTH ANDREWS AVENUE FORT LAUDERDALE FL 33311				Yes	

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

81 Name	N/A
82 Street Address (P.O. Box Number is Not Acceptable)	N/A
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: Walton, Costell Jr.

(NOTE: Registered Agent signature required when reinstating)

4/26/98

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

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

SIGNATURE: ANDREW E HIGGS, PSTD

4/26/98 - 954-925-2701

CR2E034 (10/97)