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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000087848 (3)

RAMSINGH & SONS, INC.

Principal Place of Business Mailing Address 500 TRUMAN AVE 500 TRUMAN AVE KEY WEST FL 33040 KEY WEST FL 33040 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0703993 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Ζìρ Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 X Yes ☐ No 25 29 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RAMSINGH, FRANK **500 TRUMAN AVE** 82 Street Address (P.O. Box Number is Not Acceptable) KEY WEST FL 33040

83 City

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 Registered Agent signature OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE RAMSIVGH, FRANK J NAME 1.2 NAME 117 KEY HOVEN RD STREET ADDRESS 1.3 STREET ADDRESS KEY WEST FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE RAMSINGH, ANNA NAME 2.2 NAME 117 KEY6 HAVEN RD STREET ADDRESS 2.3 STREET ADDRESS KEY WEST FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition RAMINGH, RAINDHAR M NAME 3.2 NAME 117 KEY HAVEN RD 3.3 STREET ADDRESS STREET ADDRESS KEY WEST FL CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE TS 4.1 TITLE RAMSINGH, DONALD NAME 4.2 NAME 117 KEY HAVEN RD 4.3 STREET ADDRESS STREET ADDRESS KEY WEST FL CITY - ST - ZIP 4.4 CITY - ST-ZIP DELETE Change Addition TITLE 5.1 TITLE RAMSINGH, OMYRA 5.2 NAME NAME 1130 W NORTH AVE 5.3 STREET ADDRESS STREET ADDRESS PITTSBURGH PA CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6 2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP 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 Jequired 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 KOMENDO IF LUI S. T. W.

1/16/98 Data

FILED

Jan 27 1998 8:00am

Secretary of State

Daytime Phone # 014469

Zip Code

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