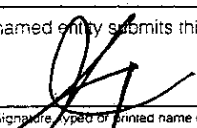


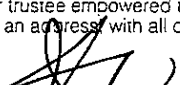
200³ UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90175 009 ***150.00

DOCUMENT # P96000095900					
1. Entity Name RAMOS AND ASSOCIATES, INC.					
Principal Place of Business 306 E. BULLARD PKWY TAMPA, FL 33617			Mailing Address 17905 CACHET ISLE TAMPA, FL 33647		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3410270	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RAMOS, JOSE S. 17905 CACHET ISLE TAMPA, FL 33647			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE 			DATE 05-05-03		
Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State		
			10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PRESIDENT & DIRECTOR	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RAMOS, JOSE S.		NAME		
STREET ADDRESS	306 E. BULLARD PKWY		STREET ADDRESS		
CITY - ST - ZIP	TAMPA, FL 33617		CITY - ST - ZIP		
TITLE	TREASURER / SECRETARY	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RAMOS, MINERVA F.		NAME		
STREET ADDRESS	306 E. BULLARD PKWY		STREET ADDRESS		
CITY - ST - ZIP	TAMPA, FL 33617		CITY - ST - ZIP		
TITLE	VICE PRESIDENT	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RAMOS, YASMIRA		NAME		
STREET ADDRESS	306 E. BULLARD PKWY		STREET ADDRESS		
CITY - ST - ZIP	TAMPA, FL 33617		CITY - ST - ZIP		
TITLE	VP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RAMOS, NADJA		NAME		
STREET ADDRESS	306 E. BULLARD PKWY		STREET ADDRESS		
CITY - ST - ZIP	TAMPA, FL 33617		CITY - ST - ZIP		
TITLE	VP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RAMOS, YARINEL		NAME		
STREET ADDRESS	306 E. BULLARD PKWY		STREET ADDRESS		
CITY - ST - ZIP	TAMPA, FL 33617		CITY - ST - ZIP		
TITLE	VP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	VALDES FELICIANO, MOISES		NAME		
STREET ADDRESS	306 E. BULLARD PKWY		STREET ADDRESS		
CITY - ST - ZIP	TAMPA, FL 33617		CITY - ST - ZIP		

13. 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 report or supplemental 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 11, or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  JOSE S. RAMOS - *05/05/03 (02) 985-3721*