2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 15, 2005 08:00 AM Secretary of State

	71111071			_		,	
DOCUMENT # P98000011943 1. Entity Name RONAN INVESTMENTS, INC.				Secretary of State			
Principal Plac 6697 SW 70' S MIAMI, FL		Mailing Address 6697 SW 70TH AVENUE S MIAMI, FL 33143 US			1 1991 Saw 1980 1980 1980	1 DOLLAR 1100 B 1100 B 1811 DTG S	5 500 15 5 (5 5 11 0
D	O NOT WRITE	06092005 No Chg-P CR2E034 (10/03) 4. FEI Number					
MAGRAM, 6697 SW 7 S MIAMI, F		DO NOT WRITE IN THIS SPACE					
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when refirstating) DATE							
PLE NOW!!! FEE 18 \$150.00 9. Election Campaign Final Trust Fund Contribution.			ncing \$5.	in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICERS AND DI ST MAGRAM, SELMA 6697 SW 70TH AVENUE S MIAMI, FL 33143 P MAGRAM, RONALD L 6697 SW 70TH AVE S MIAMI, FL 33140 V KIRSNER-CANTO, NANCY DR. 8252 SW 92 STREET A3 MIAMI, FL 33156	HECTORS	Secretary of the second		0000000 06715/05- NOT W		158.75
CITY-ST-ZIP TITLE NAME STREET ADDRESS	2		The second secon		——————————————————————————————————————	₹८००-० ०० ००	

12. 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 cartify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

GRUTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/9/05

305,740-7979