2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000024430

Entity Name: RAMCO DEVELOPMENT, INC.

FILED Oct 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6909 ARABIAN ROAD 2907 SAFE HARBOR DRIVE

ODESSA, FL 33556 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

6909 ARABIAN ROAD 2907 SAFE HARBOR DRIV E

ODESSA, FL 33556 TAMPA, FL 33618

FEI Number: 59-3503154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PATEL, RAMESH PATEL, NIKI 6909 ARABIAN ROAD 2907 SAFE HARB

6909 ARABIAN ROAD 2907 SAFE HARBOR DRIVE ODESSA, FL 33556 US TAMPA, FL 33618 US

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: NIKI PATEL 10/10/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Title: D () Delete Title: DVP (X) Change () Addition

 Name:
 PATEL, MAHESH R
 Name:
 PATEL, MAHESH R

 Address:
 6909 ARABIAN RD.
 Address:
 2907 SAFE HARBOR DRIVE

City-St-Zip: ODESSA, FL 33556 City-St-Zip: TAMPA, FL 33618

Name: PATEL, SHAILA Name: PATEL, SHAILA
Address: 6909 ARABIAN RD. Address: 2907 SAFE HARBOR DRIVE

City-St-Zip: ODESSA, FL 33556 City-St-Zip: TAMPA, FL 33618

Title: P () Delete Title: DPTS (X) Change () Addition

Name: PATEL, RAMESH Name: PATEL, NIKI

 Address:
 6909 ARABIAN RD.
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 2907 SAFE HARBOR DRIVE

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:
 TAMPA, FL 33618

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 Title:
 VP
 (X) Delete
 Title:

 Name:
 PATEL, HITESH
 Name:

 Address:
 6909 ARABIAN RD.
 Address:

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NIKI PATEL DPTS 10/10/2006