

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081183

Entity Name: RAS DEVELOPMENT, INC.

FILED  
Jul 21, 2008  
Secretary of State

## Current Principal Place of Business:

2901 PONCE DE LEON AVE  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

2901 PONCE DE LEON AVE  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 65-0948356

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YANOWITCH, PETER  
232 ANDALUSIA AVE  
STE 350  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SANCHEZ, RALPH  
Address: 550 ARVIDA PKWY  
City-St-Zip: CORAL GABLES, FL 33156

Title: VP ( ) Delete  
Name: DOMINICIS, JORGE L  
Address: 8200 SW 156 ST  
City-St-Zip: MIAMI, FL 33157

Title: RA ( ) Delete  
Name: YANOWITCH, PETER  
Address: 232 ANDALUSIA AVE, SUITE 350  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RALPH SANCHEZ

D

07/21/2008

Electronic Signature of Signing Officer or Director

Date