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

DOCUI	MENT #	S07	68

(8)

RAMOO BL INC

Sulte, Apt. #. etc

City & Stato

22

23 Zip

24

Principal Place of Business	Mailing Address	- t tabridiā iri aunii saalb āriāt innar anii ātbir urbr atbir ātalī diati ārati filbir lāa			
GALT MILE MOBIL 3053 N OCEAN BLD FT. LAUDERDALE FL 33308	3053 NORTH OCEAN BLVD. FT. LAUDERDALE FL 33306 US	DO NOT WRITE IN THIS SPACE			
US		Date Incorporated or Qualified 10/23/1990			
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied Fo			
	00 2333 11 STATE DOAN 7	65-0224220 Not Applie			

Suite, Apt. #, etc.

SUITE #

FILED

May 15 1998 8:00am

Secretary of State

Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. XYes No Personal Property Tax due June 30. 10. Name and Address of New Registered Agent

25	29 33063	30 B/C	WARD
9. Name and Address of Cu	irrent Registered Agent		
MANGNITZ, BERNIE		8	1 Name
3053 NORTH OCEAN BLVD.		8	2 Stroot A
ET LAUDERDALE EL 33308			2 Street A

Country

81	Namo BERNIE MANGNITZ	
82	Street Address P.O. Box Number is Not Acceptable)	SUITE # E
В3		

Zip Code 33063 MARGATE 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

Country

agent. I am familiar with, and 3 :cept the objugations of, Siction 607.0505, Florida Statutes.								
SIGNATURE .	Signature, typed or justical name of pasistened assent and trie if applicable	(NOTE FI	egistered Agent signature	4-22-C			A1E	
12.	OFFICERS AND DIRECTORS	there in	13.			GES TO OFFICERS		S IN 12
TITLE	PSD	DEL ÉTE	1.1 TITLE	PS	TD		Change	☐ Addition
NAME	MANGNITZ, BERNIE		1.2 NAME	BERNIE	MANGN	リアス		1
STREET ADDRESS	2730 N E 30TH AVE		1.3 STREET ADDRESS	1333 M	STATE	ROAD 7,	SUITE # E	
CITY-ST-ZIP	LIGHTHOUSE POINT FL		1.4 CITY - \$1 - 2IP	MARGAT	E. FL.	172 ROAD 7, 33063		[
TITLE		DELETE	2.1 TITLE				Change	Addition
NAME			2.2 NAME					
STREET ADDRESS			2 3 STREET ADDRESS	l				i
CITY-\$1-ZIP			2 4 CITY- ST-ZIP					
TITLE		DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME]				1
STREET ADDRESS			3.3 STREET ADDRESS	·				
CITY-ST-ZIP			3.4. CITY - ST - ZIP	i				
TITLE		DELETE	4.1 11TLE	·			Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		DELETE	5.1 TITLE				Change Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY - ST - ZIP					
TITLE		DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME			6.2 NAME					ļ
STREET ADDRESS		•	6.3 STREET ADDRESS	I				ľ
CITY-ST-7/P			64 CITY-ST-7IP	•				

14. Thereby 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 eath; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

4-22-98

954- 917- 9002