

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V27231 (2)  
1. Corporation Name  
RAMROD, INC.



Principal Place of Business 27300 OVERSEAS HIGHWAY RAMROD KEY FL 33042-5410 US	Mailing Address 27300 OVERSEAS HIGHWAY RAMROD KEY FL 33042-5410 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 04/06/1992	
4. FEI Number 65-0464958		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CUMMINS, KAREN ELIZABETH  
27300 OVERSEAS HIGHWAY  
RAMROD FL 33042

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and firm if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change Addition
STREET ADDRESS	PD	1.2 NAME	
CITY-ST-ZIP	MOORE, JAMES E., SR.	1.3 STREET ADDRESS	
	30752 PALM DRIVE	1.4 CITY-ST-ZIP	
	BIG PINE KEY FL	2.1 TITLE	Change Addition
TITLE	TD	2.2 NAME	
NAME	MOORE, ELAINE G.	2.3 STREET ADDRESS	
STREET ADDRESS	30752 PALM DRIVE	2.4 CITY-ST-ZIP	
CITY-ST-ZIP	BIG PINE KEY FL	3.1 TITLE	Change Addition
TITLE	VD	3.2 NAME	
NAME	MOORE, JAMES E., JR.	3.3 STREET ADDRESS	
STREET ADDRESS	14930 STUART RD	3.4 CITY-ST-ZIP	
CITY-ST-ZIP	SAN ANTONIO TX	4.1 TITLE	Change Addition
TITLE	SD	4.2 NAME	
NAME	CUMMINS, KAREN ELIZABETH	4.3 STREET ADDRESS	
STREET ADDRESS	27300 OVERSEAS HWY	4.4 CITY-ST-ZIP	
CITY-ST-ZIP	RAMROD KEY FL	5.1 TITLE	Change Addition
TITLE		5.2 NAME	
NAME		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	Change Addition
TITLE		6.2 NAME	
NAME		6.3 STREET ADDRESS	
STREET ADDRESS		6.4 CITY-ST-ZIP	
CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Elaine G. Moore Elaine G. MOORE

4/14/98

305-8721134

CR2E034 (10/97)