## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Jun 23, 2008 8:00 am Secretary of State 05-07-2008 90108 042 \*\*\*150.00

1. Entity Name RACOGO, INC.	130076						
						,	
Principal Place of Business 1747 NE 124TH STREET NORTH MIAMI, FL 33181	Mailing Address 1747 NE 124TH STREET NORTH MIAMI, FL 3318				10 CERT (III) FEED (C	Rimi semes est	HEDI M IDGI
2. Principal Place of Business - No P.O. Box #	3. Mailing Address	·	-				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Chg-P	CR2E034	(12/06)	
City & State	City & State		4. FEI Numb 3 2	er -0224143		<u> </u>	plied For I Applicable
Zip Country	Zip	Country		of Status Desired	Fe Fe	8.75 Add	
6. Name and Address of Cu	rrent Registered Agent	Name	7. Name and	Address of New R	tegistered Ag	ent.	
GOLDEN, RANDY C 1747 NE 124TH STREET NORTH MIAMI, FL 33181		Street Address	Address (P.O. Box Number is Not Acceptable)				
MOKIN MINMI, FL 33101							
The above named entity submits this statem		City			FL	Zip Cod	
SIGNATURE  Signature, higher or privated name of requirements of the control of t	9. Election Campaig		5.00 May Be	in accordance	0ATE with s. 607.19	93(2)(b).	F.S., the
Due by September 12, 200	Trust Fund Contri	bution.	ADDITIONS	corporation did			
INTE P STREET ADDRESS CITY-ST-ZP NORTH MIAMI, FL 33181	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS	TO OFF		Change	Addition
TITLE VP NAME GOLDEN, JAN H STREET ADDRESS 1747 NE 124TH STREET NORTH MIAMI, FL 33181	☐ Delete	TITLE NAME STREET ADDRESS CITY-51-ZIP			C	Change	Addition
ITILE S GOLDEN, JAN H STREET ADDRESS 1747 NE 124TH STREET NORTH MIAMI, FL 33181	Celcito	TITLE NAME STREET ADDRESS CITY-ST-ZIP		•	C	] Change	Addition
ITILE T NAME GOLDEN, RANDY C STREET ADDRESS 1747 NE 124TH STREET CITY-ST-ZIP NORTH MIAMI, FL 33181	☐ Delete	TITLE NAME STREET ADDRESS GITY-ST-ZIP	· · · · · ·		C	] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP	,		C	] Change	Addition
TITLE HAME STREET ADDRESS CITY-ST-ZIP	☐ Delote	TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	Change	Addition
12. I hereby certify that the information supplied indicated on this report or supplemental red the comporation or the receiver or fluster changed, or on an attachment with an additional supplied of the sup	empowered to execute this report a	as required by Chapter 6	ed in Chepter 11 e same legal effe 07. Florida Statut	es; and that my nam	further cently ceth; that I am le appears in E	310CK 1() O	stormation or director Block 11 if