


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000007510</b> 1. Entity Name <b>RAGOS INVESTMENTS, LLC</b>	
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Principal Place of Business <b>15572 SW 112 TERRACE</b> <b>MIAMI, FL 33196</b>	Mailing Address <b>15572 SW 112 TERRACE</b> <b>MIAMI, FL 33196</b>
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04022007 No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>76-0750511</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>RAMIREZ, HEMEL</b> <b>15572 SW 112 TERRACE</b> <b>MIAMI, FL 33196</b>	<p style="text-align: center; font-size: 24pt; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR</b> <b>RAMIREZ, HEMEL</b> <b>15572 SW 112 TERRACE</b> <b>MIAMI, FL 33196</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR</b> <b>GOMEZ, FABIO</b> <b>384 COCONUT CIRCLE</b> <b>WESTON, FL 33326</b>
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04/26/07-80024-014 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** *[Signature]*

*4/11/07*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #