## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000049301

1. Entity Name

RAG ENTERPRISES, LLC



Principal Place of Business

15511 N FLORIDA AVE

STE D TAMPA, FL 33613 Mailing Address

P.O. BOX 341435 TAMPA, FL 33694 FILED
May 02, 2008 08:00 AN
Secretary of State



DO NOT WRITE IN THIS SPACE

04272008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1332528

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROLAND, DOUGLAS C 500 E. KENNEDY BLVD., STE. 200 TAMPA, FL 33602

## DO NOT WRITE IN THIS SPACE

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

Signature typed or printed name of registered agent and little if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

## FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE. NAME STREET ADDRESS CITY-ST-ZIP	MGRM ANDUJAR, ROBIN 148 KEARNY AVE PERTH AMBOY, NJ 08861
NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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## DO NOT WRITE IN THIS SPACE

11. Thereby certify that the information supplied with this filling 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: \_

R PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

ANOJAR

4/24/08

727-744-03

Daytime Phone #