

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099018

Entity Name: FRAGA GROUP, L.L.C.

FILED
Jun 02, 2008
Secretary of State

Current Principal Place of Business:

533 SOUTH 5TH STREET
FORT PIERCE, FL 34950 US

New Principal Place of Business:

Current Mailing Address:

533 SOUTH 5TH STREET
FORT PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 20-5752878 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FRAGA, IVONNE
533 SOUTH 5TH STREET
FORT PIERCE, FL 34950 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FRAGA, IVONNE
Address: 533 SOUTH 5TH STREET
City-St-Zip: FORT PIERCE, FL 34950 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: FRAGA, FAUSTO W
Address: 2273 SE HEATHWOOD CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34952

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: IVONNE FRAGA

MGRM

06/02/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date