

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000099018

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

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

533 SOUTH 5TH STREET  
FORT PIERCE, FL 34950 US

**New Principal Place of Business:**

3211 SOUTH US1  
SUITE E  
FORT PIERCE, FL 34982 US

**Current Mailing Address:**

533 SOUTH 5TH STREET  
FORT PIERCE, FL 34950 US

**New Mailing Address:**

3211 SOUTH US1  
SUITE E  
FORT PIERCE, FL 34982 US

FEI Number: 20-5752878

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRAGA, FAUSTO  
2189 SW TRENTON LANE  
PORT ST. LUCIE, FL 34984 US

**Name and Address of New Registered Agent:**

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  
Name: FRAGA, FAUSTO W  
Address: 2189 SW TRENTON LANE  
City-St-Zip: PORT ST. LUCIE, FL 34984

I hereby 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: FAUSTO FRAGA

MGRM

04/26/2011

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