

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000082168

Entity Name: RAGS & BAGS, INC.

FILED  
Apr 20, 2006  
Secretary of State

## Current Principal Place of Business:

4900 LINTON BLVD  
4  
DELRAY BEACH, FL 33445 US

## New Principal Place of Business:

## Current Mailing Address:

4900 LINTON BLVD  
4  
DELRAY BEACH, FL 33445 US

## New Mailing Address:

FEI Number: 65-1037384      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KNOX, ELLEN  
3550 GALT OCEAN DR.  
STE 1007  
FT. LAUDERDALE, FL 33308 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KANZER, ANDREA  
Address: 12027 BLAIR AVE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D ( ) Delete  
Name: LYMBER, MARLENE  
Address: 5217 BRISATA CIRCLE APT K  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D ( ) Delete  
Name: MANN, MICHELLE  
Address: 3910 INVERRARY BLVD. #B-301  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: KNOX, ELLEN  
Address: 3550 GALT OCEAN DR. #1007  
City-St-Zip: FT. LAUDERDALE, FL 33308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: MANN, MICHELLE  
Address: 793 NW 25TH AVE  
City-St-Zip: DELRAY BEACH, FL 33445

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELLEN KNOX

D

04/20/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date