

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000050963		
1. Entity Name BEST RAG COMPANY INC		
Principal Place of Business 13770-50TH WAY N CLEARWATER, FL 33760		Mailing Address 13770-50TH WAY N CLEARWATER, FL 33760
DO NOT WRITE IN THIS SPACE		
		
04032006 No Chg-P CR2E034 (11/05)		
4. FEI Number 20-0016523		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
JOHNSON, ROBERT L 137550 50TH WAY NO CLEARWATER, FL 33760		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, ROBERT L 137550 50TH WAY NO CLEARWATER, FL 33760	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC ROMAN, MARTA 137550 50TH WAY NO CLEARWATER, FL 33760	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES JACOBSON, BEN 137550 50TH WAY NO CLEARWATER, FL 33760	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Marta M. Roman</u> <u>MARTA M. ROMAN</u>		4/3/06 727-571-1700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #