2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000133628

Entity Name: RAGIN CAGIN BBQ, INC.

FILED May 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5810 NW 48TH AVENUE 5459 NW CROOKED STREET COCONUT CREEK, FL 33073 US PORT ST LUCIE, FL 34986 US

Current Mailing Address: New Mailing Address:

5810 NW 48TH AVENUE 5459 NW CROOKED STREET COCONUT CREEK, FL 33073 US PORT ST LUCIE, FL 34986 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

DAVIS, HOLLY B
5810 NW 48TH AVENUE
COCONUT CREEK, FL 33073 US

DAVIS, HOLLY B
5459 NW CROOKED STREET
PORT ST LUCIE, FL 34986 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: 05/08/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 DAVIS, TODD R
 Name:
 DAVIS, TODD R

 Address:
 5810 NW 48TH AVENUE
 Address:
 5459 NW CROOKED STREET

City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: PORT ST LUCIE, FL 34986 US

Name: DAVIS, HOLLY B Name: DAVIS, HOLLY B

Address: 5810 NW 48TH AVENUE Address: 5459 NW CROOKED STREET
City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: PORT ST LUCIE, FL 34986 US

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 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: HOLLY DAVIS VP 05/08/2007