2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000023735

Name:

Address:

City-St-Zip:

AGUILAR, VERONICA

2655 LE JEUNE ROAD #507

CORAL GABLES, FL 33134

FILED May 01, 2009 Secretary of State

Entity Nar	ne: RAKET INVESTMEN	TS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2655 LE JEUNE ROAD #507					
	ABLES, FL 33134				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
#507	EUNE ROAD ABLES, FL 33134				
FEI Number: FEI Number Applied For (r Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE, FL 333114132 US			SUITE 507	2655 LE JEUNE ROAD	
The above in the State	named entity submits this of Florida.	statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JUAN VICENTE URDANETA				05/01/2009	
	Electronic Signature	of Registered Age	ent	Date	
	ce with s. 607.193(2)(b), F.S., to		ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete ROMERO, TOMAS 2655 LE JEUNE ROAD #507 CORAL GABLES, FL 33134		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () Delete ROMERO, KEILA 2655 LE JEUNE ROAD #507 CORAL GABLES, FL 33134		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VD () Delete		Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: TOMAS ROMERO DP 05/01/2009