

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19759

Entity Name: RAFAGA, INC.

FILED  
Apr 17, 2007  
Secretary of State

**Current Principal Place of Business:**

1600 S. BAYSHORE LN., UNIT 6-A  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

POBA INTL #272  
P. O. BOX 02-5255  
MIAMI, FL 33102 US

**New Mailing Address:**

FEI Number: 58-1773169      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BERNSTEIN, ROGER M.  
69 MERRICK WAY, S-201  
CORAL GABLES, FL 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: PD ( ) Delete  
Name: DREW-BEAR, CONSTANCE,  
Address: 69 MERRICK WAY #201  
City-St-Zip: CORAL GABLES, FL

Title: VD ( ) Delete  
Name: DREW-BEAR, THOMAS N  
Address: 69 MERRICK WAY #201  
City-St-Zip: CORAL GABLES, FL

Title: ST ( ) Delete  
Name: DREW-BEAR, TOM,  
Address: 69 MERRICK WAY #201  
City-St-Zip: CORAL GABLES, FL

Title: AS ( ) Delete  
Name: DREW-BEAR, JOHN RAYMOND  
Address: 1600 S BAYSHORE LN #6A  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: DREW-BEAR, THOMAS M  
Address: 69 MERRICK WAY #201  
City-St-Zip: CORAL GABLES, FL

Title: ST (X) Change ( ) Addition  
Name: DREW-BEAR, TOM  
Address: 69 MERRICK WAY #201  
City-St-Zip: CORAL GABLES, FL

Title: AS (X) Change ( ) Addition  
Name: DREW-BEAR, JOHN RAYMOND  
Address: 1600 S BAYSHORE LN #6A  
City-St-Zip: MIAMI, FL 33133 US

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: TOM DREW-BEAR

ST

04/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date