

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jul 21, 2006 8:00 am
Secretary of State**

07-21-2006 90081 001 *3,000.00

DOCUMENT # P93000019712		
1. Entity Name THE RAG SHOP/EAST HOLLYWOOD, INC.		

Principal Place of Business 111 WAGARAW RD. HAWTHORNE, NJ 07506-2711 US	Mailing Address 111 WAGARAW RD. HAWTHORNE, NJ 07506-2711 US
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2. Principal Place of Business 3911 Oakwood Blvd.	3. Mailing Address Suite, Apt. #, etc.		
City & State Hollywood, FL	City & State		
Zip 33020	Country USA	Zip	Country

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
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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 _____
Signature, typed or printed name of registered agent and title if applicable
(NOTE: Registered Agent signature required when refileting) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STAFFIERI, RICHARD 111 WAGARAW ROAD HAWTHORNE, NJ 07506	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Mark Syrstad 111 Wagaraw Road Hawthorne, NJ 07506	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOYKAS, SUSAN 111 WAGARAW ROAD HAWTHORNE, NJ 07506	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T Steven B. Barnett 111 Wagaraw Road Hawthorne, NJ 07506	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KING, SCOTT T 111 WAGARAW ROAD HAWTHORNE, NJ 07506	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOMBARDO, JUDITH 111 WAGARAW ROAD HAWTHORNE, NJ 07506	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D James D. Allen 111 Wagaraw Road Hawthorne, NJ 07506	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  Steven B. Barnett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/11/2006

Date

973-423-1303

Daytime Phone #

66022109



07102006 Chg-P CR2E034 (11/05)