

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122429

**FILED**  
**Mar 26, 2007**  
**Secretary of State**

**Entity Name:** RO TOC, LLC

**Current Principal Place of Business:**

% GREENBERG TRAURIG, P.A.  
1221 BRICKELL AVENUE  
MIAMI, FL 33131

**New Principal Place of Business:**

C/O OZZIE SCHINDLER, GREENBERG TRAURIG  
1221 BRICKELL AVENUE  
MIAMI, FL 33131 US

**Current Mailing Address:**

% GREENBERG TRAURIG, P.A.  
1221 BRICKELL AVENUE  
MIAMI, FL 33131

**New Mailing Address:**

C/O OZZIE SCHINDLER, GREENBERG TRAURIG  
1221 BRICKELL AVENUE  
MIAMI, FL 33131 US

**FEI Number:** 20-4293310

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CABABIE, JACOBO  
Address: 1995 W. COUNTRY CLUB DRIVE., SUITE 900  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CABABIE DANIEL, JACOBO  
Address: 1995 W. COUNTRY CLUB DRIVE., SUITE 900  
City-St-Zip: AVENTURA, FL 33180 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACOBO CABABIE DANIEL

MGR

03/26/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date