2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jul 10, 2007 08:00 AM **DOCUMENT # L04000058708 Secretary of State** 1. Entity Name TOCKWOGH, L.L.C. Principal Place of Business Mailing Address 15406 PATTERSON ROAD 15406 PATTERSON ROAD ODESSA, FL 33556-2721 ODESSA, FL 33556-2721 CR2E083 (11/05) 07052007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1730989 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HORWITZ, WILLIAM H DO NOT WRITE 15406 PATTERSON RD. ODESSA, FL 33556 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by September 14, 2007 MANAGING MEMBERS/MANAGERS 9. MGR TITLE HORWITZ, WILLIAM H NAME STREET ADDRESS 15406 PATTERSON RD U00000767650 U7/10/07-80013-003 50.00 CITY-ST-ZIP ODESSA, FL 33556 MLE STREET ADDRESS CITY-ST-78 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE IIILE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS COV-ST-7IP MLE NAME

of nation supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the this report as required by Chapter 608, Florida Statutes. 11. I hereby certify that the indicated on this report is limited liability company

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

H. HORWITZ 7/9/07 TEL: 8/3-920-34/3