2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000012846

1. Entity Name

Principal Place of Business

4141 WEST BONANZA DRIVE BEVERLY HILLS, FL 34465

THOR HOLDINGS, LLC

Mailing Address

4141 WEST BONANZA DRIVE BEVERLY HILLS, FL 34465

FILED Feb 12, 2008 08:00 AM Secretary of State



01042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number Applied For 59-3797143 Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Regulired

6. Name and Address of Current Registered Agent

THOR, TINA J 4141 W. BONANZA DR. BEVERLY HILLS, FL 34465

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| The above named entity submits this statement for the purpose of changing the obligations of registered agent. | ng its registered office or registered agent, or bo | th, in the State of Florida. I am familiar with, and accept |
|--|---|---|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. | (NOTE Registered Agent signature required when reinstating) | DATE |

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000825572 02/21/08-80016-002 138.75

| 9. | MANAGING MEMBERS/MANAGERS | |
|---------------------------------------|--|--|
| TITLE | MGR | |
| NAME STREET ADDRESS | THOR, DONALD H JR. 4141 WEST BONANZA DRIVE | |
| CITY-ST-ZIP | BEVERLY HILLS, FL 34465 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR THOR, TINA J 4141 WEST BONANZA DRIVE BEVERLY HILLS, FL 34485 | |
| TITLE | S THOR, TINA J | |
| STREET ADDRESS | 4141 WEST BONANZA DRIVE | DO NOTWOITE |
| CITY-ST-ZIP | BEVERLY HILLS, FL 34465 | DO NOT WRITE |
| FITLE NAME STREET ADDRESS CITY-ST-ZIP | T THOR, DONALD H 4141 WEST BONANZA DRIVE BEVERLY HILLS, FL 34465 | IN THIS SPACE |
| TITLE | | |
| NAME | | |
| STREET ADDRESS CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS CITY-ST-ZIP | | |
| 44 1 5 5 | positive that the information a unplied with this filing does not qualify for the av | and the section of in Chanter 110 Florida Statutes I butter and that |

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute his report as required by Chapter 608, Florida Statutes.

SIGNATURE: \ \V XIII

R AUTHORIZED REPRESENTATIVE

21808 613-555°

Daytime Phone #