

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000057720

Entity Name: OFCAT, L.L.C.

FILED
Jan 10, 2007
Secretary of State

Current Principal Place of Business:

821 EAST OCEAN BOULEVARD
SUITE A
STUART, FL 34994 US

New Principal Place of Business:

Current Mailing Address:

821 EAST OCEAN BOULEVARD
SUITE A
STUART, FL 34994 US

New Mailing Address:

FEI Number: 20-5156055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COEL, MARK A ESQ.
1900 GLADES ROAD
SUITE 350
BOCA RATON, FL 33431 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: MGRM () Delete
Name: STRAUSS, SORRELL I D.M.D.
Address: 821 EAST OCEAN BOULEVARD, SUITE A
City-St-Zip: STUART, FL 34994 FL

Title: MGMR () Delete
Name: STRAUSS, JAMES E D.M.D.
Address: 821 EAST OCEAN BOULEVARD, SUITE A
City-St-Zip: STUART, FL 34994 FL

ADDITIONS/CHANGES:

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

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

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: SORRELL I. STRAUSS

MGRM

01/10/2007

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