


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jul 14, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L06000074595</b> 1. Entity Name TOVMAZAL, LLC	
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Principal Place of Business 1428 BRICKELL AVENUE, SUITE 206 MIAMI, FL 33131	Mailing Address 1428 BRICKELL AVENUE, SUITE 206 MIAMI, FL 33131
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**DO NOT WRITE IN THIS SPACE**



07082008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5283590	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  FIGUEROA, JUAN A 1428 BRICKELL AVENUE SUITE 206 MIAMI, FL 33131
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**DO NOT WRITE  
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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**FILE NOW!!! FEE IS \$138.75  
Due by September 12, 2008**

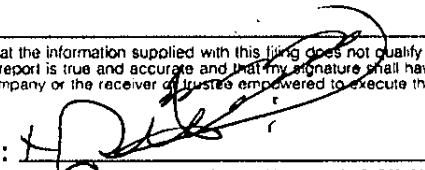
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U000000954829  
07/14/08-80015-020 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MEMUN ELIAS, ZION 1428 BRICKELL AVENUE, SUITE 206 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CATTAN SUTTON, ISAAC 1428 BRICKELL AVENUE, SUITE 206 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MEMUN ZAGA, JOSE 1428 BRICKELL AVENUE, SUITE 206 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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.

<b>SIGNATURE:</b> 	<b>Date:</b> x 7-11-08	<b>Daytime Phone #:</b> x 305-448-5814
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