

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081788

Entity Name: TOCCA MIAMI LLC

FILED
Jan 13, 2008
Secretary of State

Current Principal Place of Business:

801 BRICKELL KEY BLVD.
APT. # 706
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1731
TEMECULA, CA 92593

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

URIBE, REINALDO
801 BRIKELL KEY BLVD
APT. # 706
MIAMI, FL 33131 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: PRES () Delete
Name: TOCCACELI, LORENZO
Address: 801 BRICKELL KEY BLVD., APT. 706
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: TOCCACELI, LEONARDO
Address: 801 BRICKELL KEY BLVD., APT. 706
City-St-Zip: MIAMI, FL 33131

Title: ST () Delete
Name: FRULLA, ROBERTO E
Address: 4103 MISSION
City-St-Zip: FALLBROOK, CA 92028

ADDITIONS/CHANGES:

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

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

Title: ST (X) Change () Addition
Name: FRULLA, ROBERTO E
Address: 4103 MISSION ROAD
City-St-Zip: FALLBROOK, CA 92028

I hereby certify that the information supplied with this filing does not qualify 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: ROBERTO E. FRULLA

SECR

01/13/2008

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