2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# L07000108927

Entity Name: PROPERTY DAMAGE CONSULTANTS, LLC

Current Principal Place of Business:

9045 LA FONTANA BLVD., SUITE 238
BOCA RATON, FL 33432

New Principal Place of Business:

9045 LA FONTANA BLVD., SUITE 238
BOCA RATON, FL 33434

Current Mailing Address:

9045 LA FONTANA BLVD., SUITE 238
BOCA RATON, FL 33432

New Mailing Address:

9045 LA FONTANA BLVD., SUITE 238
BOCA RATON, FL 33434

FEI Number: 26-1603742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DRILLICH, CRAIG
9045 LA FONTANA BLVD
SUITE 238
BOCA RATON, FL 33434 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: MGR ( ) Delete
Name: ABCAT LLC,
Address: 9045 LA FONTANA BLVD, SUITE 238
City-St-Zip: BOCA RATON, FL 33434

Title: MGR ( ) Delete
Name: DRILLICH, CRAIG
Address: 9045 LA FONTANA BLVD, SUITE 238
City-St-Zip: BOCA RATON, FL 33434

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 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: CRAIG DRILLICH MGR 01/20/2009

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