2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000121476

Entity Name: 2502 TOCS, LLC

Address:

City-St-Zip:

1500 SAN REMO AVE STE 248

CORAL GABLES, FL 33146

FILED Feb 13, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1500 SAN REMO AVE STE 248 CORAL GABLES, FL 33146 **Current Mailing Address: New Mailing Address:** 1500 SAN REMO AVE STE 248 CORAL GABLES, FL 33146 FEI Number: 26-1540373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARED, PABLO R ESQ 1500 SAN REMO AVE STE 248 CORAL GABLES, FL 33146 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete PONS, DAVID Name: Name: Address: 1500 SAN REMO AVE STE 248 Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: SALINAS, JUAN J 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: DAVID PONS P 02/13/2008