2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L93000000274

1. Entity Name

THOMAS INVESTMENTS, L.C.



FILED Apr 19, 2007 08:00 A Secretary of State

Principal Place of Business

9905 CLINT MOORE RD. BOCA RATON, FL 33496 Mailing Address

9905 CLINT MOORE RD. BOCA RATON, FL 33496



04172007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0431454	Applied For Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HCRM CORP. 2200 CORPORATE BLVD. N.W. SUITE 401 BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered	d office or registered agent, or both	n, in the State of Florida. I am familiar with, and accept
SIGNATURE.				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere			Agent signature required when rainstating)	DATE
FI D	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			
NAME	THOMAS, JOHN J JR.			
STREET ADDRESS	9905 CLINT MOORE RD.			
CITY-ST-ZIP	BOCA RATON, FL 33496			
TITLE	MGR			MAAAAAAAA
NAME	THOMAS, STEPHEN M			000000717656 04/30/07-80057-001 150.0
STREET ADDRESS	9905 CLINT MOORE RD.			04/30/01-00031-001 130.0
CiTY-ST-ZIP	BOCA RATON, FL 33496			
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TITLE				

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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

JRE: _____ - STEPHEN M. THOM.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/17/07 (561)483-111)