


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000001447 1. Entity Name DYNAMIC FINANCIAL CONSULTANTS, LLC	
--	---

FILED

05 MAR 30 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 6911 BRYAN DAIRY ROAD SUITE 210 LARGO, FL 33777	Mailing Address 6911 BRYAN DAIRY ROAD SUITE 210 LARGO, FL 33777
--	--

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



03262005 Chg-LLC CR2E083 (10/03)

6. Name and Address of Current Registered Agent	
TANEJA, JUGAL K 6950 BRYAN DAIRY ROAD LARGO, FL 33777	

4. FEI Number 59-3640809	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

7. Name and Address of New Registered Agent	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State
---	--	--

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ONLINE MEDS RX, INC. <input type="checkbox"/> Delete 6911 BRYAN DAIRY RD STE 210 LARGO, FL 33773	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGMR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ONLINE MEDS RX, INC. 6911 BRYAN DAIRY RD STE 210 LARGO, FL 33777

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Online Meds Rx, Inc. by

SIGNATURE: Janis Sluman, SEC 03-28-2005 727-329-1845

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ET/Roberts APP 7/2003