## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000092731

Entity Name: OMEGABERRY, LLC

Address:

City-St-Zip:

6945 MILL BROOK PLACE

LAKE WORTH, FL 33463

FILED Jul 03, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	HRIDGE ROAD, STE. #06 NBEACH, FL 33426			
Current M	lailing Address:	New Mailing Addres	ss:	
	H RIDGE ROAD, STE. #06 N BEACH, FL 33426			
In accordan	: 26-0882724 FEI Number Applied For ( ) ice with s. 607.193(2)(b), F.S., the limited liability		Certificate of Status Desired ( ) e. of New Registered Agent:	
The above in the State	RRA PALMS DR BEACH, FL 33484 US named entity submits this statement for the of Florida.	e purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:	Vacet	 Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () Delete ACCON, CESAR R 16087 SIERRA PALMS DR DELREY BEACH, FL 33484	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete DIREITO, ANTONIO S 16087 SIERRA PALMS DR DELREY BEACH, FL 33484	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete SGAMBATO, MARCO A 16087 SIERRA PALMS DR DELREY BEACH, FL 33484	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete BELCHIOR, FERNANDO M 16087 SIERRA PALMS DR DELREY BEACH, FL 33484	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	MGRM ( ) Delete STIMSON, JOSHUA GRANT	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: FERNANDO BELCHIOR MGRM 07/03/2008