# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041455

Entity Name: OMAX, LLC

## **Current Principal Place of Business:**

9500 NW 11TH STREET PLANTATION, FL 33322

## **Current Mailing Address:**

9500 NW 11TH STREET PLANTATION, FL 33322 US

## FEI Number: 26-2951437

WACHS, JEFFREY S %DOUMAR, ALLSWORTH, LAYSTROM, VOIGT, WACHS 1177 SE 3RD AVE FT LAUDERDALE, FL 33316-1109 US

Name and Address of Current 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

## Authorized Person(s) Detail :

Title	MBR
Name	SCHACHNER, ROBERT
Address	521 NORTH FEDERAL HIGHWAY
City-State-Zip:	HOLLYWOOD FL 33020

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT D. SCHACHNER

MANAGING PARTNER

02/27/2017 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 27, 2017 Secretary of State CC0195844881

Certificate of Status Desired: No

Date