

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000014377

1. Entity Name

OVERSEAS SERVICES OF AMERICA, LLC



Principal Place of Business

9B SW 107TH AVE.
MIAMI, FL 33174

Mailing Address

18560 SW 43RD ST.
MIRAMAR, FL 33029



03012006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1054167

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fees Required

6. Name and Address of Current Registered Agent

KOHLMAN, STEVEN J
18560 SW 43RD ST
PEMBROKE PINES, FL 33029

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GOMEZ, MAURICIO
STREET ADDRESS	19516 SW 43RD ST
CITY-ST-ZIP	MIRAMAR, FL 33029
TITLE	MGR
NAME	KOHLMAN, MICHELE
STREET ADDRESS	18560 SW 43RD ST.
CITY-ST-ZIP	MIRAMAR, FL 33029
TITLE	MGR
NAME	KOHLMAN, STEVEN
STREET ADDRESS	18560 SW 43RD ST.
CITY-ST-ZIP	PEMBROKE PINES, FL 33029
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/23/06-80019-009 50.00

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IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE:

Steven J. Kohlman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2.28.06

(305) 5510400

Date

Daytime Phone #