


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 12, 2004 8:00 am
Secretary of State

05-12-2004 90007 016 ****50.00

DOCUMENT # L01000009901 1. Entity Name OMNI COMPUTERS DIRECT, LLC	
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Principal Place of Business 15261 TELCON DR SPRING HILL, FL 34604	Mailing Address 15261 TELCON DR SPRING HILL, FL 34604
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62014000




05042004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-2326057	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent JARQUE, GREG 15261 TELCON DR. BROOKSVILLE, FL 34604 	DO NOT WRITE IN THIS SPACE
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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 September 8, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HAGLAND, SCOTT 20 PEACHTREE COURT #202 HOLBROOK, NY 11741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JARQUE, GREG 15261 TELCON DR SPRING HILL, FL 34604
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**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

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

Date

Daytime Phone #

5-4-04 352-7899997