## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000006286

City-St-Zip:

MIAMI, FL 33143

FILED Mar 10, 2004 Secretary of State

Entity Name: BMS OMNI, LLC **New Principal Place of Business: Current Principal Place of Business:** 5901 S.W. 74TH STREET SUITE 205 MIAMI, FL 33143 **Current Mailing Address: New Mailing Address:** 5901 S.W. 74TH STREET SUITE 205 MIAMI, FL 33143 FEI Number: 04-3692879 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, VICTOR 5901 S.W. 74TH STREET SUITE 205 MIAMI, FL 33143 US 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 Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGR () Delete () Change () Addition BROWN, VICTOR Name: Name: Address: 5901 S.W. 74TH STREET Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: BROWN, DAVID Name: Address: 5901 S.W. 74TH STREET Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: MGR () Delete Title: () Change () Addition BROWN, STEVEN Name: Name: 5901 S.W. 74TH STREET Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: VICTOR BROWN VP 03/10/2004