## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032413

Entity Name: OM, LLC

Apr 27, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3416 W. WALLCRAFT AVE. TAMPA, FL 33611

**Current Mailing Address: New Mailing Address:** 

3416 W. WALLCRAFT AVE. TAMPA, FL 33611

FEI Number: 13-4226812 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:

SPIEGEL & UTRERA, P.A CHAND, KALIA 1840 SOUTHWEST 22 STREET 3416 WEST WALLCRAFT AVE 4TH FLOOR TAMPA, FL 33611 US MIAMI, FL 33145 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: CHAND KALIA 04/27/2004

> Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MEMBERS:**

MGR ( ) Delete KALIA, CHAND A Name: Address: 3416 W. WALLCRAFT AVE.

City-St-Zip: TAMPA, FL 33611

Title:

() Delete Name:

Address: City-St-Zip:

## ADDITIONS/CHANGES:

MGRM (X) Change ( ) Addition

KALIA, CHAND A Name:

Address: 3416 W. WALLCRAFT AVE.

City-St-Zip: TAMPA, FL 33611

Title: MGRM ( ) Change (X) Addition

Name: KALIA, RUBY

Address: 3416 WEST WALLCRAFT AVE

City-St-Zip: TAMPA, FL 33611

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.

SIGNATURE: CHAND KALIA **MGRM** 04/27/2004