

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003589

Entity Name: OSM INVESTMENTS, LLC

FILED  
May 02, 2007  
Secretary of State

**Current Principal Place of Business:**

7177 N.W. 49TH COURT  
LAUDERHILL, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

7177 N.W. 49TH COURT  
LAUDERHILL, FL 33319

**New Mailing Address:**

FEI Number: 01-0779665      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BROWN, BEVIN C  
2201 SOUTH SHERMAN CIRCLE  
D 507  
MIRAMAR, FL 33025 US

**Name and Address of New Registered Agent:**

BROWN, BEVIN C  
1249 SW 46TH AVE  
#1413  
POMPAÑO BEACH, FL 33069 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: BEVIN C. BROWN

05/02/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WILLIE, MICHELLE  
Address: 7177 NW 49TH CT  
City-St-Zip: LAUDERHILL, FL 33319

Title: MGR ( ) Delete  
Name: MULLINGS, SEAN  
Address: 7177 NW 49TH CT  
City-St-Zip: LAUDERHILL, FL 33319

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BEVIN C. BROWN

RA

05/02/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date