

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021324

FILED  
Mar 25, 2004  
Secretary of State

Entity Name: OTCIM, L.L.C.

## Current Principal Place of Business:

C/O MARC GORDON, ESQ  
8551 WEST SUNRISE BLVD, STE. 208  
PLANTATION, FL 33322

## New Principal Place of Business:

C/O MARC GORDON, ESQ  
8551 WEST SUNRISE BLVD, STE. 210  
PLANTATION, FL 33322

## Current Mailing Address:

C/O MARC GORDON, ESQ  
8551 WEST SUNRISE BLVD, STE. 208  
PLANTATION, FL 33322

## New Mailing Address:

C/O MARC GORDON, ESQ  
8551 WEST SUNRISE BLVD, STE. 210  
PLANTATION, FL 33322

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRANK, HOWARD  
C/O MARC GORDON, ESQ  
8551 WEST SUNRISE BLVD, STE. 208  
PLANTATION, FL 33322 US

## Name and Address of New Registered Agent:

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:

Title: MGR ( ) Delete  
Name: LIEBERMAN, GLENN  
Address: 8551 WEST SUNRISE BLVD, STE 208  
City-St-Zip: PLANTATION, FL 33322

## ADDITIONS/CHANGES:

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

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: GLENN LIEBERMANN

MGRM

03/25/2004

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