2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L04000009549

OM PROPERTIES, L.L.C.



FILED Mar 27, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

5553 HIGHWAY 90 PACE, FL 32571

5553 HIGHWAY 90 PACE, FL 32571



03242008 No Chg-LLC

CR2E083 (12/07)

4. FEi Number 20-0694520 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PURUSHOTTAM KUMAR GARG 5553 HIGHWAY 90 PACE, FL 32571

DO NOT WRITE IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

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FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 04/09/08-80122-018 138.75

MANAGING MEMBERS/MANAGERS 9. TITLE MGRM PURUSHOTTAM KUMAR GARG NAME 4534 AMBLEWOOD COURT STREET ADDRESS CITY-ST-ZIP PACE, FL 32571 MGRM TITLE NAME GARG, ANJU STREET ADDRESS 4534 AMBLEWOOD COURT CITY-ST-ZIP PACE, FL 32571 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Garl Purushettamk Garg Meure 3-24.08

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