

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013411

Entity Name: OMT, LLC

FILED  
Apr 21, 2005  
Secretary of State

**Current Principal Place of Business:**

3848 SW 30 AVENUE  
FT LAUDERDALE, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

3848 SW 30 AVENUE  
FT LAUDERDALE, FL 33312

**New Mailing Address:**

FEI Number: 20-0756548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SACHS, JOSEPH D CPA  
3107 STIRLING ROAD  
SUITE 201  
FT LAUDERDALE, FL 33312 US

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

SACHS, JOSEPH D CPA  
6175 NW 153 STREET  
SUITE 215  
MIAMI LAKES, FL 33014 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:

04/21/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: TRAAD, MONIQUE  
Address: 3848 SW 30 AVENUE  
City-St-Zip: FT LAUDERDALE, FL 33312

Title: MGR ( ) Delete  
Name: JOHNSTON, TERRY  
Address: 3848 SW 30 AVENUE  
City-St-Zip: FT LAUDERDALE, FL 33312

**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 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: MONIQUE TRAAD

MGRM

04/21/2005

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