

FILED
May 16, 2005 8:00 am
Secretary of State

01-31-2005 90203 013 ****55.00

2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000017577			
1. Entity Name OM-SVN, LLC			
Principal Place of Business 3055 ALATKA CT LONGWOOD, FL 32779		Mailing Address 3055 ALATKA CT LONGWOOD, FL 32779	
2. Principal Place of Business		3. Mailing Address 1061 Medical Center Drive	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 101	
City & State Orange City FL		City & State Orange City FL	
Zip 32763	County USA	4. FEI Number 26-0764591	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required		Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent HIPPALGAONKAR, SUVARNA 3055 ALATKA CT LONGWOOD, FL 32779		7. Name and Address of New Registered Agent	
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City		FL Zip Code	
8. The above named entity certifies 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 <i>Suvarna Gaonkar</i>		DATE 1-27-2005	
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	managing member Suvarna Hippalgaonkar 3055 Alatka Ct Longwood, FL 32779 ☐ Delete 51%	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Share Holder Neha Hippalgaonkar 3055 Alatka Ct Longwood, FL 32779 ☐ Delete 16%	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Share Holder Sonali Hippalgaonkar 3055 Alatka Ct Longwood, FL 32779 ☐ Delete 16%	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Share Holder Varun Hippalgaonkar 3055 Alatka Ct Longwood, FL 32779 ☐ Delete 16%	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Joint Share Mr + Mrs. R. Hippalgaonkar 3055 Alatka Ct Longwood, FL 32779 ☐ Delete 16%	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify 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 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 606, Florida Statutes.			
SIGNATURE: <i>Suvarna Gaonkar</i>		Date 5/1/05 386-774-2100	