

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000036115

**Entity Name:** OMEGA FUNDING GROUP, LLC

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

900 NORTH EAST 195 STREET, #304  
304  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

900 NORTH EAST 195 STREET  
304  
NORTH MIAMI BEACH, FL 33179

**Current Mailing Address:**

900 NORTH EAST 195 STREET, #304  
304  
NORTH MIAMI BEACH, FL 33179

**New Mailing Address:**

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

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

TAYLOR, ELAINE  
900 NORTH EAST 195 STREET, #304  
304  
NORTH MIAMI BEACH, FL 33179 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/MANAGERS:**

Title: MGR  
Name: TAYLOR, ELAINE  
Address: 900 NORTH EAST 195 STREET, #304  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby 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: ELAINE TAYLOR                      MGR                      03/31/2010

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