

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037532

FILED
Jun 19, 2006
Secretary of State

Entity Name: NOMY LLC

Current Principal Place of Business:

2701 SOUTH BAYSHORE DRIVE, #402
MIAMI, FL 33133

New Principal Place of Business:

4669 N UNIVERSITY DRIVE
CORAL SPRINGS, FL 33067

Current Mailing Address:

2701 SOUTH BAYSHORE DRIVE, #402
MIAMI, FL 33133

New Mailing Address:

4669 N UNIVERSITY DRIVE
CORAL SPRINGS, FL 33067

FEI Number: 20-2786959 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GLAZMAN, SYLVAIN
2701 SOUTH BAYSHORE DRIVE, #402
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

GLAZMAN, SYLVAIN
4669 N UNIVERSITY DRIVE
CORAL SPRINGS, FL 33067 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: SYLVAIN GLAZMAN

06/19/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GLAZMAN, SYLVAIN
Address: 2701 SOUTH BAYSHORE DRIVE, #402
City-St-Zip: MIAMI, FL 33133

Title: MGR () Delete
Name: GLAZMAN, SERGE
Address: 2701 SOUTH BAYSHORE DRIVE, #402
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GLAZMAN, SYLVAIN
Address: 4669 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: MGR (X) Change () Addition
Name: GLAZMAN, SERGE
Address: 4669 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SYLVAIN GLAZMAN

P

06/19/2006

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