

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062224

Entity Name: WOM LLC

FILED  
Mar 27, 2006  
Secretary of State

**Current Principal Place of Business:**

6535 NOVA DRIVE  
106  
DAVIE, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

6535 NOVA DRIVE  
106  
DAVIE, FL 33317

**New Mailing Address:**

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

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

PFEFFER, OLIVER  
6535 NOVA DRIVE  
106  
DAVIE, FL 33317 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: MGRM ( ) Delete  
Name: SCHULTZ, DAVID  
Address: 6535 NOVA DRIVE SUITE 106  
City-St-Zip: DAVIE, FL 33317

Title: MGRM ( ) Delete  
Name: REICH, DAVID  
Address: 6535 NOVA DRIVE SUITE 106  
City-St-Zip: DAVIE, FL 33317

Title: MGRM ( ) Delete  
Name: PFEFFER, OLIVER  
Address: 6535 NOVA DRIVE SUITE 106  
City-St-Zip: DAVIE, FL 33317

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: OLIVER PFEFFER

MRMR

03/27/2006

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