# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Aug 08, 2008**
**Secretary of State**

DOCUMENT# L05000062224

**Entity Name:** WOM LLC

**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: 20-3379242** **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:**

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 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 MGRM 08/08/2008

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