## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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## **DOCUMENT # L05000071605**

1. Entity Name OMC PROPERTIES, LLC



Principal Place of Business

Mailing Address

500 EAST BROWARD BOULEVARD, SUITE 1950 FORT LAUDERDALE, FL 33394

500 EAST BROWARD BOULEVARD, SUITE 1950 FORT LAUDERDALE, FL 33394

**FILED** Apr 16, 2008 08:00 A Secretary of State



04042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
NOT APPLICABLE	Ì	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

MOMBACH, GEOFFREY S MOMBACH BOYLE & HARDIN, P.A. 500 EAST BROWARD BOULEVARD, SUITE 1950 FORT LAUDERDALE, FL 33394

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8. The above named entity submits this statement for the purpo	se 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			
Oldi (71) Oli E			

After May 1, 2008 Fee will be \$538.75

000000901294 04/29/08-80062-016 138.75

9. 🚿	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WIENER, WILLIAM A 500 E BROWARD BLVD STE 1950 FORT LAUDERDALE, FL 33394
NAME STREET ADDRESS CITY: ST-ZIP	
TITLE NAME STREET ADDRESS CITY-S1-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	to the control of the
The inereby of	certify that the information supplied with this filing does not qualify for the e

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #