

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000026921

Entity Name: OMANCA GROUP LLC

FILED
May 29, 2008
Secretary of State

Current Principal Place of Business:

8251NW 8TH ST
#412
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

8251NW 8TH ST
#412
MIAMI, FL 33126

New Mailing Address:

FEI Number: 41-2200629 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:

LAGRABA, OMAR
8251NW 8TH ST
#412
MIAMI, FL 33126 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 () Delete
Name: HERRERA, CARLOS
Address: 412 EAST 40TH STREET REAR APT
City-St-Zip: MIAMI, FL 33013

Title: MGR (X) Delete
Name: LAGRABA, OMAR
Address: 8251NW 8TH ST #412
City-St-Zip: MIAMI, FL 33126

Title: MGR (X) Delete
Name: JALAFF, ANGEL
Address: 217 SW 3 AVE
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LAGRABA, OMAR
Address: 8251NW 8TH ST #412
City-St-Zip: MIAMI, FL 33126

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: OMAR LAGRABA

MGR

05/29/2008

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