

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088434

FILED
Mar 31, 2007
Secretary of State

Entity Name: OMEGA SECURITY INTERNATIONAL, LLC

Current Principal Place of Business:

5555 COLLINS AVE, SUITE 4Y
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

5555 COLLINS AVE
SUITE 4Y
MIAMI BEACH, FL 33140 US

Current Mailing Address:

5555 COLLINS AVE, SUITE 4Y
MIAMI BEACH, FL 33140 US

New Mailing Address:

P.O. BOX 190823
MIAMI BEACH, FL 33119 US

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

Name and Address of Current Registered Agent:

GONZALEZ, CAMILO
5555 COLLINS AVE. SUITE 4Y
MIAMI BEACH, FL 33140 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: GONZALEZ, CAMILO
Address: 671 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM () Delete
Name: POLANCO, CARLOS
Address: 671 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM () Delete
Name: ARMSTRONG, LEON
Address: 671 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM () Delete
Name: AYALA, RICARDO
Address: 671 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139 US

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:

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: CAMILO GONZALEZ

MGRM

03/31/2007

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