

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000006845

Entity Name: THE OEMS GROUP, INC.

FILED
Feb 01, 2007
Secretary of State

Current Principal Place of Business:

11350 NW 36 TERRACE
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

11350 NW 36 TERRACE
MIAMI, FL 33178

New Mailing Address:

FEI Number: 65-0735886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINK, BRIAN L
2600 DOUGLAS ROAD
#1109
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: LIROFF, JEFFREY
Address: 11350 NW 36 TERRACE
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: AGUIRRE, JOSE
Address: 11350 NW 36TH TERRACE
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: DE WITTE, KRIS
Address: 11350 NW 36TH TERRACE
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: ABISCH, JOHN
Address: 11350 NW 36TH TERRACE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: LOVO, JESUS
Address: 11350 NW 36TH TERRACE
City-St-Zip: MIAMI, FL 33178

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY LIROFF

PSD

02/01/2007

Electronic Signature of Signing Officer or Director

Date