

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB -6 PM 12: 04

DOCUMENT # 726549 (9)

1. Corporation Name

OMEGA CONDOMINIUM NO. 8, INC.

Principal Place of Business

Mailing Address

7500 N.W. 17TH STREET  
PLANTATION FL 33313-2174

7500 N.W. 17TH STREET  
PLANTATION FL 33313-2174

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/30/1973  
3a. Date of Last Report 02/17/1994

4. FEI Number 59-1559708  
Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERGMAN, A.C., CPA  
7515 W. OAKLAND PARK BLVD.  
LAUDERHILL FL 33319

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	RUBENFAER, BENJAMIN
STREET ADDRESS	7500 N.W. 17TH ST.
CITY - ST - ZIP	PLANTATION FL
TITLE	DD D
NAME	RABINOWITZ, EDWIN
STREET ADDRESS	7500 N.W. 17TH ST.
CITY - ST - ZIP	PLANTATION FL
TITLE	D
NAME	ROTHENBERG, JOSEPH
STREET ADDRESS	7500 N.W. 17TH ST.
CITY - ST - ZIP	PLANTATION FL
TITLE	TD
NAME	OPPENHEIMER, JOHN
STREET ADDRESS	7500 N.W. 17TH ST.
CITY - ST - ZIP	PLANTATION FL
TITLE	VD
NAME	ROSESWEEP, LAWRENCE
STREET ADDRESS	7500 NW 17TH STREET
CITY - ST - ZIP	PLANTATION, FL 00000
TITLE	SD
NAME	SILVERMAN, CEILLA
STREET ADDRESS	7500 N W 17TH STREET
CITY - ST - ZIP	PLANTATION FL

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PERLSTEIN, BENJAMIN	
1.3 STREET ADDRESS	7500 N.W. 17+6 ST.	
1.4 CITY - ST - ZIP	PLANTATION FL.	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(h), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John Oppenheimer* JOHN OPPENHEIMER, TREASURER/DIRECTOR 2/1/95 305-581-2533