

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 19, 2006 8:00 am
Secretary of State

06-19-2006 90003 016 ****61.25

DOCUMENT # 736763	
1. Entity Name OMEGA CONDOMINIUM NO 11, INC	

DO NOT WRITE IN THIS SPACE

40096085

2. Principal Place of Business OMEGA CONDO BLDG 11	3. Mailing Address 1801 NW 75 AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

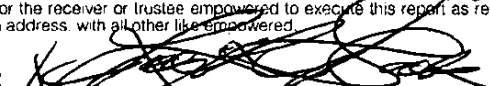
City & State PLANTATION FL	City & State FL	4. FCI Number 54-1800202	Applied For Not Applicable
33313	Country USA	Zip 33313	Country USA
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Roy R BLACK	
	Street Address (P.O. Box Numbers Not Acceptable) 1801 NW 75 AVE	
	#212	
	City PLANTATION	FL 33313

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 6/10/06

FEE IS \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres Roy BLACK 1801 NW 75 AVE #212 PLANTATION FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP William Beretta 1801 NW 75 AVE #207 PLAN FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC JOMMEL TAYLOR 1801 NW 75 AVE #312 PLAN FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANITA BROWN 1801 NW 75 AVE #208 PLAN FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JEAN ELLIOTT 1801 NW 75 AVE #109 PLAN FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treas MELODY OTTO 1801 NW 75 AVE #212 PLAN FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	DATE 6/10/06 954-7916965

CR2E037B (12/02)