

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000071225

FILED
Feb 09, 2005
Secretary of State

Entity Name: AMIR OMEGA CORPORATION

Current Principal Place of Business:

P.O. BOX 173985
MIAMI LAKES, FL 33017

New Principal Place of Business:

6285 NW 190TH TERR.
MIAMI LAKES, FL 33015

Current Mailing Address:

P.O. BOX 173985
MIAMI LAKES, FL 33017

New Mailing Address:

FEI Number: 65-0162933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTELL, ANSLER
6285 NW 19TH TR.
MIAMI LAKES, FL 33015 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: VPS () Delete
Name: WILSON, FAD
Address: 7366 BIRCHTREE FORREST
City-St-Zip: HOUSTON, TX 77088

Title: T () Delete
Name: MURAEI, HAULEY
Address: 19808 BPARTHEIA ST.
City-St-Zip: NORTHRIDGE, CA 91324

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MONTELL, ANSLER
Address: 6285 NW 190TH TERR.
City-St-Zip: MIAMI LAKES, FL 33015

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

Title: VP () Change (X) Addition
Name: WILSON, FAD
Address: 7366 BIRCHTREE FORREST
City-St-Zip: HOUSTON, TX 77088

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANSLER MONTELL

P

02/09/2005

Electronic Signature of Signing Officer or Director

_____ Date