Ï

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Sep 03, 2002 8:00 am Secretary of State

09-03-2002 90001 029 ***150.00

1. Entity Nar	MENT # V07463 OMANA INC.	Ullia						
	DO NOT WRITE	IN THIS	SPAC	Έ	<u> </u>			
2. Principal Place of Business 2580 SW 114TH AVE Suite, Apt. #, etc.		3. Mailing Address 2580 SW 114TH AVE Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Stat MIAMI, F	E FLORIDA	City & State MIAMI, FLORIDA			4. FEI Number 65-0340920 Applied For Not Applicable			
Zip 33165	Zip Country 33165 MIAMI-DADE		Count MIAN	ry MI-DADE	5. Certificate of Status Desired See Required Fee Required			
DO NOT W				7. Name and Address of Current Registered Agent Name IVELISSE CHARLES Street Address (P.O. Box Number is Not Acceptable)				
	IN THIS SF	ACE		2580 SW 1	2580 SW 114TH AVE City MIAMI FL Zip Code 33165			
Tax filing (Syliature, typed or printed name of registered agent pration is eligible to satisfy its intangible requirement and elects to do so, ria on back)	Januar Afte An	(NOTE Registered y 1 - May 1 Fe r May 1, Fee Is sended UBR (s	\$550.0 0	unen reinstating) DATE 10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
11.	OFFICERS AND							
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	P CHARLES, IVELISSE 2580 SW 114TH AVE MIAMI FL 33165 VP ARAUJO, REINALDO 2580 SW 114TH AV MEAMI; EL:33165		CRY: Tifle NAME STREE CRY:	T ADDRESS ST. 2/P				
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

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REINALL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REINALDO ARAUJO

08/27/02

(305)221-4188

Date

Daylime Phone #

CR2E034B (12/01)

Affachment 677420 4107463

AUGUST 27, 2002

LA ROMANA INC. 2580 SW 114TH AVE MIAMI, FL 33165

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

DEAR SIR / MADAM

As per our telephone conversation enclosed please find a check in the amount of \$150.00 for the 2002 Uniform Business Report, which was originally mailed to my old address, 2818 N.W. 22Nd. Avenue, Miami, Fl 33142. Somehow the original was not forwarded to my new address, indicated above.

SINCERELY

Reynaldo Araujo