## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46867

Entity Name: THE OMEGA RECREATION COUNCIL, INC.

**Current Principal Place of Business:** 

7200 NW 17 STREET PLANTATION FL 33313

**Current Mailing Address:** 

PO BOX 19439

PLANTATION, FL 33318 US

FEI Number: 65-0402617 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A. 2699 STIRLING ROAD, SUITE C207 FORT LAUDERDALE, FL 33312 US

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: CHARLES F. OTTO, ESQ.

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title D Title D

Name CLEOPHAT, JOUBERT Name JASSO, TOMAS
Address PO BOX 19439 Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318 City-State-Zip: PLANTATION FL 33318

Title D Title D

Name KALISH, MARTIN Name MCCLINTOCK, MARY

Address PO BOX 19439 Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318 City-State-Zip: PLANTATION FL 33318

Title DIRECTOR Title DIRECTOR

Name LEWIN, NATALIE Name GOLDENBURG, JEFFREY

Address C/O ALLIANCE PROPERTY SYSTEMS Address PO BOX 19439

PO BOX 19439 City-State-Zip: PLANTATION FL 33318

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR

 Title
 DIRECTOR
 Name
 JORGE, DANIEL

 Name
 MOUNIR, MIKE
 Address
 PO BOX 19439

Address PO BOX 19439 City-State-Zip: PLANTATION FL 33318

City-State-Zip: PLANTATION FL 33318

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SINGH, ARJUN PRESIDENT 03/22/2023

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 22, 2023

**Secretary of State** 

8920399647CC

03/22/2023

## Officer/Director Detail Continued:

Title DIRECTOR

Name GANGOO, RONALD

Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR, PRESIDENT

Name SINGH, ARJUN Address 7200 NW 17TH ST

City-State-Zip: PLANTATION FL 33313

Title DIRECTOR

Name MORALES, THELMA

Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR

Name HOOKER, TERRY

Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR

Name OROWALE, HEZEKIAH

Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318