

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 736763 (4)

1. Corporation Name
OMEGA CONDOMINIUM NO. 11, INC.



Principal Place of Business 1801 NW 75TH AVENUE PLANTATION FL 33313	Mailing Address 1801 NW 75TH AVENUE PLANTATION FL 33313
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3. Date Incorporated or Qualified 09/07/1976		
4. FEI Number 59-1800202	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**JEROME ROTH
1801 NW 75TH AVE
PLANTATION FL 33313**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Jerome Roth* DATE 3/9/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SCHWAB, ESTHER		1.2 NAME	
STREET ADDRESS 1801 NW 75 AVENUE		1.3 STREET ADDRESS	
CITY-ST-ZIP PLANTATION FL		1.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ROTH, JEROME		2.2 NAME	
STREET ADDRESS 1801 NW 75 AVENUE		2.3 STREET ADDRESS	
CITY-ST-ZIP PLANTATION FL		2.4 CITY-ST-ZIP	
TITLE PD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME COMITOR, EVELYN		3.2 NAME	
STREET ADDRESS 1801 NW 75 AVENUE		3.3 STREET ADDRESS	
CITY-ST-ZIP PLANTATION FL		3.4 CITY-ST-ZIP	
TITLE VD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BROWN, DAVID		4.2 NAME	
STREET ADDRESS 1801 NW 75 AVENUE		4.3 STREET ADDRESS	
CITY-ST-ZIP PLANTATION FL		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FEINSTEIN, IRENE		5.2 NAME	
STREET ADDRESS 1801 NW 75TH AVE.		5.3 STREET ADDRESS	
CITY-ST-ZIP PLANTATION FL		5.4 CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DIAMOND, THEODORE		6.2 NAME	
STREET ADDRESS 1801 NW 75TH AVE.		6.3 STREET ADDRESS	
CITY-ST-ZIP PLANTATION FL		6.4 CITY-ST-ZIP	

14. 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 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: *Jerome Roth* DATE: 3/16/98 958 7920796

CP2E037 (10/97)