

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 736763 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

FILED Mar 01, 1999 8:00 am § Secretary of State

03-01-1999 90205 015 ****61.25



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2. Principal Place of Business		2a. Mailing Address			3. Date Incorporated or Qualifed 09/07/1976				
21 26 Suite, Apt. #, etc. Suite, Apt. #			#. etc.			4. FEI Number		ADE	lied For
	#, 6tc.	27			59-1800202			Applicable	
City & Stat	te	City & State			5. Certificate of Status Desired		\$8.75 A		
23		28	Counts						<u>-</u>
Zip	Country	Zip	Country			6. Election Campaign Financing		\$5.00 M Added to	
24	25	1 1	30		-	Trust Fund Contribution 10. Name and Address of New I	Pagistared		1 663
	9. Name and Address of Curre	int Registered Agent	8	1 Na	me.	Talle and Addids of No.	togiotoroa.		
JEROME ROTH				2 Str	eet Addr	ess (P.O. Box Number is Not Accept	able)		
1801 NW 75TH AVE			8	-				_	
PLANTATI	ON FL 33313		6	۱"				,	
			8	4 Cit	у		FL	85 Zip C	ode
11 Dumuant	to the provisions of Sections 617.05	502 and 617 1508 Florida Statute	s the abo	ve-nar	ned coro	oration submits this statement for the		changing its r	egistered
office or a agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was au jations of, Section 617.0503, Flori	thorized b	y the o	corporatio	oration submits this statement for the on's board of directors. I hereby acce	pt the appoi	itment as reg	istered
SIGNATURE		ALOTE ALOTE	Danistand A.		there may lead	dukas minutating)	DATE		
12.	Signature, typed or printed name of registered ag	pent and title if applicable. (NOTE:	13.	eni signi	mure required	d when reinstating) ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
	I	DELETE	1.1 TITLE					Change	Addition
TITLE	OCURAR FOTUED	_ Jack 10	1.2 NAME					_ ,	_
NAME	SCHWAB, ESTHER			-				**	
STREET ADDRESS	1		1.3 STRE		ŒSS		•		
CITY-ST-ZIP	PLANTATION FL	☐ DELETE	1.4 CITY-		ļ			☐ Change	Addition
TITLE	D	□ DECE IE	2.1 TTLE					onengo	
NAME	ROTH, JEROME		2.2 NAME		ļ				
STREET ADDRESS	1		2.3 STRE	ET ADDF	RESS	•			
CITY-ST-ZIP	PLANTATION FL		2. 4 CITY						□ A deltion
TITLE	PD	☐ DELETE	3.1 TITLE			A Commence		Change	☐ Addition
NAME	COMITOR, EVELYN		3.2 NAME		- (2. ** **	•		
STREET ADDRESS	1801 NW 75 AVENUE		3.3 STRE	ET ADDF	RESS	or the residence		4	
CITY-ST-ZIP	PLANTATION FL.		3.4. CITY	-ST-ZIP		* * * * * * * * * * * * * * * * * * * *			
TITLE	VD	☐ DELETE	4.1 TITLE					Change	Addition
NAME	BROWN, DAVID		4. 2 NAM	E					
STREET ADDRESS	1801 NW 75 AVENUE		4.3 STRE	ET ADOF	RESS				
CITY-ST-ZIP	PLANTATION FL		4.4 CITY-	ST-ZIP					
TITLE	D	☐ DELETE	5.1 TITLE					☐ Change	Addition Addition
NAME	FEINSTEIN, IRENE		5.2 NAME						
STREET ADDRESS	1801 NW 75TH AVE.		5.3 STRE	ET ADD	RESS				
CITY-ST-ZIP	PLANTATION FL		5.4 CITY-	ST-ZIP					_
TITLE	100 D	☐ DELETE	6.1 TITLE				·	☐ Change	☐ Addition
NAME	DIAMOND, THEODORE		6.2 NAME	.					
STREET ADDRESS			6.3 STRE	ET ADD	RESS				
OTHER MEDIACOO	DI ANTATION EI		6.4 CITY	ST-ZIP	- 1				

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, with all other like empowered.

SIGNATURE:

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