

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90124 019 ****61.25

DOCUMENT # 736763

1. Entity 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 33313-5190

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1800202

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

(Handwritten signature and scribbles over the current agent information)

Name

GEORGE BERG

Street Address (P.O. Box Number is Not Acceptable)

1801 N.W. 75th AV. # 213

City

PLANTATION, FL.

Zip Code

FL 33313

8. 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

(Handwritten signature of George J. Berg)

George J. Berg-Tres. 2/14/00

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SCHWAB ESTHER	
STREET ADDRESS	1801 NW 75 AVENUE	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROTH, JEROME	
STREET ADDRESS	1801 NW 75 AVENUE	
CITY-ST-ZIP	PLANTATION FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	COMITOR, EVELYN	
STREET ADDRESS	1801 NW 75 AVENUE	
CITY-ST-ZIP	PLANTATION FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	BROWN, DAVID	
STREET ADDRESS	1801 NW 75 AVENUE	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	FEINSTEIN, IRENE	
STREET ADDRESS	1801 NW 75TH AVE.	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	DIAMOND, THEODORE	
STREET ADDRESS	1801 NW 75TH AVE.	
CITY-ST-ZIP	PLANTATION FL	

TITLE	SEC.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEAN ELLIOTT	
STREET ADDRESS	1801 N.W. 75th AV.	
CITY-ST-ZIP	PLANTATION, FL 33313	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RUTH SPECTOR	
STREET ADDRESS	1801 N.W. 75th AV.	
CITY-ST-ZIP	PLANTATION, FL 33313	
TITLE	Treas.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GEORGE BERG	
STREET ADDRESS	1801 N.W. 75th AV.	
CITY-ST-ZIP	Plantation, FL 33313	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *(Handwritten signature of Evelyn Comitor)* **EVELYN COMITOR 2/14/00 954-797-5218**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)