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May 08 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 # **737721** (1)

1. Corporation Name

OMNI INTERNATIONAL-MIAMI MERCHANT'S ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**1601 BISCAYNE BLVD
SUITE 1119
MIAMI FL 33132
US**

**1601 BISCAYNE BLVD
MIAMI FL 33132**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/30/1976

4. FEI Number

59-1718969-76-054-688A

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

**ALVAREZ, ANNETTE M
1601 BISCAYNE BLVD
ROOM 1119
MIAMI FL 33132**

81

Name **PETE A MARRERO**

82

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

1601 BISCAYNE BLVD

83

SUITE 1119

84

City **MIAMI**

FL

85

Zip Code **33132**

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

Pete A. Marrero

PETE A. MARRERO

4/26/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**P
NEWMAN, PHIL
1601 BISCAYNE BLVD
MIAMI FL 33132**

TITLE ☒ DELETE

**ST
MARRERO, PETE
1601 BISCAYNE BLVD
MIAMI FL**

TITLE ☒ DELETE

**ED
JAITT, MIGUEL
1601 BISCAYNE BLVD
MIAMI FL 33132**

TITLE ☒ DELETE

**ED
KAUFMAN, VICTOR
1601 BISCAYNE BLVD
MIAMI FL 33132**

TITLE ☐ DELETE

**ED
SINGER, BILLY
1601 BISCAYNE BLVD
MIAMI FL 33132**

TITLE ☐ DELETE

**ED
RAJWANOI, SAM
1601 BISCAYNE BLVD
MIAMI FL 33132**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

**ST
MARIA VALDES
1601 BISCAYNE BLVD
MIAMI FL 33132**

3.1 TITLE ☐ Change ☒ Addition

**ED
DAVID SPIVAK
1601 BISCAYNE BLVD
MIAMI FL 33132**

4.1 TITLE ☐ Change ☒ Addition

**ED
NICOLA STASI
1601 BISCAYNE BLVD
MIAMI FL 33132**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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:

Pete A. Marrero

4/26/98

(305) 370-6664

CR2E037 (10/97)