

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000000508

**FILED**  
**Feb 23, 2012**  
**Secretary of State**

**Entity Name:** OMNIPLEX MANAGEMENT INC

**Current Principal Place of Business:**

7454 SARENTINO LN  
BOYNTON BEACH, FL 33437

**New Principal Place of Business:**

**Current Mailing Address:**

3422 OLD CAPITAL TRAIL RD SUITE 700  
WILMINGTON, DE 19808

**New Mailing Address:**

**FEI Number:** 99-0362763

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROY, ALAIN  
7454 SARENTINO LN  
BOYNTON BEACH, FL 33437 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** CDPS  
**Name:** ROY, ALAIN  
**Address:** 7454 SARENTINO LN  
**City-St-Zip:** BOYNTON BEACH, FL 33437

**Title:** VCD  
**Name:** KOUTSOGIANNIS, GEORGE  
**Address:** 7454 SARENTINO LN  
**City-St-Zip:** BOYNTON BEACH, FL 33437

**Title:** VP  
**Name:** KOUTSOGIANNIS, GEORGE  
**Address:** 7454 SARENTINO LN  
**City-St-Zip:** BOYNTON BEACH, FL 33437

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

**SIGNATURE:** ALAIN ROY

DIR

02/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date