

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Monham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 9: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F61220 (2)**
1. Corporation Name
OMEGA DIVERSIFIED INVESTMENT CONSORTIUM, INC.

Principal Place of Business
**121 NW 6TH AVENUE
FT. LAUDERDALE FL 33311**

Mailing Address
**P.O. BOX 238
FT. LAUDERDALE FL 33302**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/06/1982

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2278555

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**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes
☒ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**CHERRY, CHARLES W.
121 NW 6TH AVENUE
FT LAUDERDALE FL 33311**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and the corporation)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C
NAME	HICKS, CHARLES W.
STREET ADDRESS	37163 HEATHER COURT S.
CITY, ST, ZIP	WESTLAND MI 48185
TITLE	D
NAME	CHERRY, GLENN W.
STREET ADDRESS	11511 DYRHAM LANE
CITY, ST, ZIP	GLENDAL MD 20769
TITLE	D
NAME	FERGUSON, DAVID H.
STREET ADDRESS	9717 GLENN LAUREL WAY
CITY, ST, ZIP	CHARLOTTE NC 28210
TITLE	S
NAME	CHERRY II CHARLES W.
STREET ADDRESS	121 NW 6TH AVE.
CITY, ST, ZIP	FT. LAUDERDALE FL 33311
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a checkmark, 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 in Block 12 or Block 13, typed, or on an attachment with an address.

SIGNATURE:

Charles W. Cherry II
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 *305-527-0713*
Date (Typed Name)