## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM!

	PORATION STATEMENT		Sec	PARTMENT OF STAT retary of State	E	04 FEB 13 AH 9: 3 SECRETARY OF STATE TALLAHASSCH FLOPIE		
1. Corporati	MENT # F6 ion Name Diversified Inve		ortium Inc.				° 07-04	
2. Principal Office Address 5207 Washington Blvd. 5207 W				Address agton Blvd.	31 02/10	00029013763 8/0401028004 **4!	3 58.75 °	
Suite, Apt. #, etc.			Suite, Apt. #, etc.		4. Date Incorp	4. Date incorporated or Qualified To Do Business in Florida		
City & State Tampa, FL			City & State Tampa, FL		<b>5.</b> FEI Number 65-00013	FEI Number Applied For 5-0001399 Not Applicable		
z <sub>ip</sub> 33619	Country USA		<sup>Zip</sup> 33619	Country	6. CERTIFICAT		nal Fee required cate of Status	
S. L. being	Charles W. Cherry II  Street Address (P.O. Box Number is Not Acceptable) 5207 Washington Blvd.  Suite, Apt. #, Etc.  City_ Tampa  appointed the registered agent of the above named corporation, am familiar with and accept the				the obligations of sect	State Zip Code 33619	O4CA	
Signature of Registered	Agent	514	CWH REGISTERED AGEN	IT MUST SIGN	<del> </del>	Date 2/4/09		
9. Names Titles	and Street Addresses of Each Officer and/or Director (f  Name of  Officers and/or Directors			Street Address of Each Officer and/or Director		City / State / Zip		
C, P	Charles W. Hicks			26253 Castleton Dr.		Southfield, Mi. 48076		
D	Harry Marshall		1	436 15th St SE		Washington, DC. 20003		
Т	Duane L. Davis			5017 Mayberry La.		Winston Salem, NC. 27106		
S	Glenn W. Cherry			5207 Washington Blvd.		Tampa, FL. 33619		
			e					

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/04 313.

313.594.7557

Daytime Phone #

To: Florida Department of State

February 12, 2004

Division of Corporations Reinstatement Section

P.O. Box 6327, Tallahassee, FL. 32314

(850) 245.6059

Re:

Omega Diversified Investment Consortium Inc.

5207 Washington Blvd,

Tampa, FL. 33619

Document # F61220

To Whom It May Concern,

The Omega Diversified Investment Consortium Inc. requests that you waive the (\$600) reinstatement fee for said entity, as for some reason, we have not received notice of Corporate filing fees due for 2002, 2003 or 2004 and have been advised by your office, that the forms were returned.

Please see enclosed a check in the amount of \$450 to satisfy fees due for:

Reinstatement Fee

= \$600 (WAIVER REQUESTED)

Remstatement 1 cc

=\$150

2002 Corporate filing fee

-\$150 =\$150

2003 Corporate filing fee 2004 Corporate filing fee

= \$150

Total

= \$450

**Certificate of Status** 

= 8.75

(SEND TO CHARLES HICKS)

Address below

Total Due = \$458.75

If there is a concern, please contact me as noted below.

Signed,

Charles W. Hicks

Omega Diversified Investment Consortium Inc.

Chairman & President

26253 Castleton Dr. Southfield, Mi. 48076

(248) 569.6045, (313) 594.7557 day email:chicks100@hotmail.com