

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006567

FILED
Apr 29, 2007
Secretary of State

Entity Name: OMNI ENGINEERING OF OHIO, INC.

Current Principal Place of Business:

1200 POGY PLACE., P.O. BOX 767
FERNANDINA BEACH, FL 320343180

New Principal Place of Business:

1200 POGY PLACE
FERNANDINA BEACH, FL 320343180

Current Mailing Address:

433 W. 6TH AVE
COLUMBUS, OH 43201

New Mailing Address:

FEI Number: 31-1306572 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THOMPSON, THOMAS G
Address: 5101 N. A1A
City-St-Zip: FT PIERCE, FL

Title: V () Delete
Name: EVANS, ROBERT D
Address: 500 E. MAYNARD
City-St-Zip: COLUMBUS, FL

Title: S () Delete
Name: LOVELAND, CURTIS A ESQ
Address: 41 S. HIGH STREET
City-St-Zip: COLUMBUS, OH

Title: T () Delete
Name: BURLEY, DEBRA L
Address: 644 THISTLE AVE
City-St-Zip: GAHANNA, OH

Title: V () Delete
Name: ROBOL, RICHARD T
Address: 433 W 6TH AVE
City-St-Zip: COLUMBUS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS G THOMPSON

PD

04/29/2007

Electronic Signature of Signing Officer or Director

_____ Date