## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 14, 2000 8:00 am DOCUMENT # **J87921** 1. Entity Name **Secretary of State** OMNI INVESTMENTS INTERNATIONAL, INC. 01-14-2000 90059 015 \*\*\*150.00 Mailing Address Principal Place of Business 2065 CANTU COURT 2065 CANTU COURT SARASOTA FL 34232-6239 SARASOTA FL 34232 AUUU4036 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 36-3521142 Not Applicable Country \$8.75 Additional Zio Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SAWYER JR., DANFORD L. Street Address (P.O. Box Number is Not Acceptable) 2065 CANTU COURT SARASOTA FL 34232 City Zip Code 8. 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Delete ☐ Change ☐ Addition TITLE SAWYER, DANFORD L. NAME NAME STREET ADDRESS 2065 CANTA CT. STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-7IP TITLE ☐ Change ☐ Addition Delete TITLE SAWYER, RUTHANNE NAME NAME STREET ADDRESS 2065 CANTU CT. STREET ADDRESS CITY: ST-ZIP CITY-ST-ZIP SARASOTA-FL----☐ Addition ☐ Delete TITLE TITLE HARTLEY, MICHEAL NAME NAME 2065 CANTU CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL □ Change Addition ☐ Delete TITLE JOE, LOUINGOOD MAME NAME 2065 CANTU CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE VICTOR, VAILE NAME NAME 2065 CANTU CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report of supplemental report of 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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