## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000126086

Entity Name: OMEGA CONSTRUCTION GROUP, LLC

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 269 CAMERON CIR 269 CAMERON DRIVE WESTON, FL 33326 WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 269 CAMERON CIR 269 CAMERON DRIVE WESTON, FL 33326 WESTON, FL 33326 FEI Number: 38-3772913 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: ANGEL, LILIANA ANGEL, LILIANA 269 CAMERON DRIVE 269 CAMERON CIR WESTON, FL 33326 US WESTON, FL 33326 US 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: LILIANA ANGEL 04/30/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SUNSHINE COMPLETE PA, INTING IMPROVE M ENTS Name: Name: 1039 BLUE WOOD TERRACE Address: Address: City-St-Zip: WESTON, FL 33327 City-St-Zip: Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition P DELTA CONSTRUCTION, LLC Name: P DELTA CONSTRUCTION, LLC Name: Address: 269 CAMERON CIR Address: 269 CAMERON DRIVE City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326 Title: () Delete Title: MGR ( ) Change (X) Addition LAMBOGLIA, ORESTE Name: Name: 269 CAMERON DRIVE Address: Address: City-St-Zip: City-St-Zip: WESTON, FL 33326 Title: () Delete Title: MGR ( ) Change (X) Addition Name: Name: ANGEL, LILIANA Address: Address: 269 CAMERON DRIVE City-St-Zip: City-St-Zip: WESTON, FL 33326 Title: () Delete Title: ( ) Change (X) Addition CONTRERAS, NINOSKA Name: Name: 1039 BLUE WOOD TERRACE Address: Address: City-St-Zip: City-St-Zip: WESTON, FL 33327

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LILIANA ANGEL MGR 04/30/2008