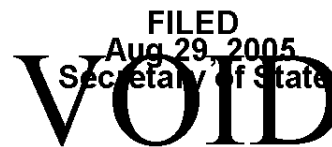


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L18780

Entity Name: OMEGA SYSTEMS, INC.



Current Principal Place of Business:

100 FIRST AVENUE SOUTH
SUITE 400
ST. PETERSBURG, FL 33701

Current Mailing Address:

100 FIRST AVENUE SOUTH
SUITE 400
ST. PETERSBURG, FL 33701

New Principal Place of Business:

800 CARILLON PARKWAY
SUITE 250
ST. PETERSBURG, FL 33716

New Mailing Address:

800 CARILLON PARKWAY
SUITE 250
ST. PETERSBURG, FL 33716

FEI Number: 65-0153335

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FOWLER WHITE BOGGS BANKER P.A.
DAVID C. SHOBE, ESQ.
501 E. KENNEDY BLVD., SUITE 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
2711 CENTERVILLE ROAD
SUITE 400
WILMINGTON, DE, FL 19808 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: DAWN HACKNEY

08/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: KRAYER, ANTHONY C.,
Address: 340 W TROPICAL WAY
City-St-Zip: PLANTATION, FL

Title: D () Delete
Name: FAULCONER, LEE,
Address: 10500 UNIVERSITY CENTER DR #160
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: KUSENS, BRUCE,
Address: 16422 N.E. 34 AVE.
City-St-Zip: N MIAMI BEACH, FL

Title: D () Delete
Name: WIENER, DAVID
Address: 10500 UNIVERSITY CTR. DR STE 160
City-St-Zip: TAMPA, FL 33612

Title: VT (X) Delete
Name: O'NEILL, THOMAS
Address: 10500 UNIVERSITY CTR DR #160
City-St-Zip: TAMPA, FL 33612

Title: P (X) Delete
Name: INDRIGO, JOHN
Address: 10500 UNIVERSITY CTR. DR #160
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: SCHWEITZER, SHEILA A
Address: 800 CARILLON PARKWAY, STE 250
City-St-Zip: ST. PETERSBURG, FL 33716

Title: CFO (X) Change () Addition
Name: DUNHAM, JOSEPH R II
Address: 800 CARILLON PARKWAY, STE 250
City-St-Zip: ST. PETERSBURG, FL 33716

Title: COO (X) Change () Addition
Name: WOHLFORD, TOM
Address: 800 CARILLON PARKWAY, STE 250
City-St-Zip: ST. PETERSBURG, FL 33716

Title: VPF (X) Change () Addition
Name: LIGHTSEY, MARK D
Address: 800 CARILLON PARKWAY, STE 250
City-St-Zip: ST. PETERSBURG, FL 33716

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 for the exemption stated in Section 119.07(3)(i), 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: DAWN HACKNEY

CONT

08/29/2005

Electronic Signature of Signing Officer or Director

Date

FILED IN ERROR - RA ADDRESS & SIGNATURE OF OFFICER/RA INCORRECT