	PROFIT PROPATION NUAL REPORT 1996	Secr		F STATE				
OOCL Corporal	JMENT # M4400	67 (0)						
OMNI	INVESTMENT CONSULTAN	ITS, INC.			I IPRICEIL III BIBLI CIALI BOMA	HI) 168) Aran A	i di	
rincipal Pla	ice of Business	Mailing Address						
19091 TAMIAMI TRAIL. S.E. Ft. Myers fl 33908 Us		19091 TAMIAMI TRAIL	C/O Paul H. Freeman 19091 tamiami trail. S.E. Ft. Myers Fl. 33908					
		US			 Date Incorporated or Qualified 01/01/1987 		Date of Last Report	
Principal Place of Business		2a. Mailing Address	2a. Mailing Address 26		4. FEI Number	1	05/11/1995 Applied For	
Suite, Apt	#, etc.	Suite, Apt #, etc			59-2778613		Not Applica	
City & Sta	le	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
Zip	Country	Crly & State 28	T		Election Campaign Financin Trust Fund Contribution	9 🗀	\$5.00 May Be Added to Fees	
	25	Zip (29)	Countr 30	Ý	This corporation has liability Florida Statutes	for intangible		
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New	Yes [Registered	No Agent	
FI	REEMAN, PAUL H.		81	Name				
	100 S. Dadeland Blvd. 1406		82	Street Add	dress (P.O. Box Number is Not Accep	itable)		
	AMI FL 33156			_i				
			83	3				
			83				OF Zu Code	
Pursuant office or r	to the provisions of Sections 607,050	2 and 607, 1508, Florida Statu	84	City	poration submits the distance to the	FL	85 Zip Code	
	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida Such change was thons of Section 607.0505, Fi	84	City	poration submits this statement for the looks board of directors. I hereby acc	FL purpose of ept the appo	1 1 '	
	to the provisions of Sections 607,050 registered agent, or both, in the State of familiar with, and accept the obligations for the state of the stat	ct and life if applicable (NC	tes, the above authorized by orida Statutes	City e-named corp the corporati	and a substant of the copy and	FL purpose of ept the appo	· ·	
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6/30/96 District Phone 8

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR