

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 23, 1999 8:00 am
Secretary of State

09-23-1999 90010 023 ****70.00

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1. Corporation Name

OMNI BOOSTER CLUB, INC.

Principal Place of Business

825 BRICKELL BAY DRIVE
TOWER III - SUITE 1748
MIAMI FL 33131

Mailing Address

825 BRICKELL BAY DRIVE
TOWER III - SUITE 1748
MIAMI FL 33131



2. Principal Place of Business

21 10351 NE 5th Ave

Suite, Apt. #, etc.

22

City & State

23 Miami Shores, FL

Zip

24 33138

Country

25 USA

2a. Mailing Address

26 10351 NE 5th Ave

Suite, Apt. #, etc.

27

City & State

28 Miami Shores, FL

Zip

29 33138

Country

30 USA

3. Date Incorporated or Qualified

03/09/1998

4. FEI Number

91-1972751

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

9. Name and Address of Current Registered Agent

SARAFAN, RICHARD ESQUIRE
825 BRICKELL BAY DRIVE
TOWER III - SUITE 1748
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name Scott Alan ORTH Esq.
82 Street Address (P.O. Box Number is Not Acceptable) 1380 NE MIAMI GARDENS DR.
83 #255
84 City N.M.Pb. FL 85 Zip Code 33177

11. Pursuant to the provisions of Sections 617.0502 and 617.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/14/99

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME OTTO, EDGAR E JR
STREET ADDRESS 74 N.E. 110 STREET
CITY-ST-ZIP MIAMI FL 33161

TITLE DV ☐ DELETE

NAME DEL GROSSO, ELAINE
STREET ADDRESS 246 N.E. 105 STREET
CITY-ST-ZIP MIAMI SHORES FL 33138

TITLE DV ☐ DELETE

NAME FRANCIS, SYDNEY
STREET ADDRESS 101715 GRIFFING BOULEVARD
CITY-ST-ZIP BISCAYNE PARK FL 33161

TITLE DT ☐ DELETE

NAME STEWART-MUNIZ, DIANE PH.D
STREET ADDRESS 760 N.E. 96 STREET
CITY-ST-ZIP MIAMI SHORES FL 33138

TITLE DS ☐ DELETE

NAME MCADAMS, MARY ANNE
STREET ADDRESS 1218 N.E. 98 STREET
CITY-ST-ZIP MIAMI SHORES FL 33138

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition

1.2 NAME Elaine A. DelGrosso
1.3 STREET ADDRESS 246 NE 105 Street
1.4 CITY-ST-ZIP Miami Shores FL 33138

2.1 TITLE DV ☒ Change ☐ Addition

2.2 NAME Mary Anne McAdams
2.3 STREET ADDRESS 1218 NE 98 Street
2.4 CITY-ST-ZIP Miami Shores FL 33138

3.1 TITLE DT ☐ Change ☒ Addition

3.2 NAME Kimberly Logan-Hynes
3.3 STREET ADDRESS 302 NE 100 Street
3.4 CITY-ST-ZIP Miami Shores, FL 33138

4.1 TITLE DS ☐ Change ☒ Addition

4.2 NAME Patricia Walker
4.3 STREET ADDRESS 972 NE 93 Street
4.4 CITY-ST-ZIP Miami Shores, FL 33138

5.1 TITLE DS ☐ Change ☒ Addition

5.2 NAME Maria Leshansky
5.3 STREET ADDRESS 11701 NE 9th Avenue
5.4 CITY-ST-ZIP Biscayne Park, FL 33161

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual report is 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/9/99 (305) 756 3925
Date Daytime Phone #

CR2E037 (5/99)