


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 08, 2005 8:00 am**  
**Secretary of State**

09-08-2005 90068 045 \*\*\*158.75

<b>DOCUMENT # P01000044906</b> 1. Entity Name <b>OMEGA ENGINEERING, INC.</b>					
Principal Place of Business <b>7392 SW 78 COURT MIAMI, FL 23143</b>			Mailing Address <b>7392 S.W. 78TH COURT MIAMI, FL 33143</b>		
2. Principal Place of Business <i>12173 NW 99th Avenue</i>		3. Mailing Address <i>12173 NW 99th Avenue</i>			
Suite, Apt. #, etc. <i>Bay#2</i>		Suite, Apt. #, etc. <i>Bay#2</i>			
City & State <i>Hialeah Gardens</i>		City & State <i>Hialeah Gardens</i>			
Zip <i>33018</i>	Country <i>miam Dade</i>	Zip <i>33018</i>	Country <i>miam Dade</i>		
6. Name and Address of Current Registered Agent  <b>ALEJANDRO, BETANCOURT</b> <b>7392 SW 18 COURT</b> <b>MIAMI, FL 33143</b>			7. Name and Address of New Registered Agent Name <i>Jose Vega</i> Street Address (P.O. Box Number is Not Acceptable) <i>12173 NW 99th Avenue,</i> <i>Bay#2</i> City <i>Hialeah Gardens</i> <b>FL</b> Zip Code <i>33018</i>		
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <i>[Signature]</i> <i>Jose Vega</i> DATE <i>9/5/05</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <i>[Delete]</i> <b>ALEJANDRO, BETANCOURT</b> <b>7392 SW 78 COURT</b> <b>MIAMI, FL 33143</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>President</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Jose Vega</b> <b>12173 NW 99th Avenue</b> <b>Hialeah Gardens, FL 33018</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <i>[Delete]</i> <b>BETANCOURT, MARIA</b> <b>7392 S.W. 78TH COURT</b> <b>MIAMI, FL 33143</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>Vice President</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Elena Reyes</b> <b>12173 NW 99th Avenue</b> <b>Hialeah Gardens, FL 33018</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> <i>Elena Reyes</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			DATE <i>9/5/05</i> DAYTIME PHONE # <i>305 820-8333</i>		