

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000091717

FILED
May 31, 2005
Secretary of State

Entity Name: OMEGA ALPHA ENGINEERING USA, CORP.

Current Principal Place of Business:

1110 BRICKELL AVE., STE. 804
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1110 BRICKELL AVE., STE. 804
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-1147127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, DIANA M
1110 BRICKELL AVE., STE. 804
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ACOSTA, ALFREDO
Address: 5201 BLUE LAGOON DRIVE PENTHOUSE
City-St-Zip: MIAMI, FL 33126

Title: STD () Delete
Name: ACOSTA, DIANA M
Address: 5201 BLUE LAGOON DRIVE PENTHOUSE
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ACOSTA, ALFREDO
Address: 1110 BRICKELL AVENUE SUITE 804
City-St-Zip: MIAMI, FL 33131

Title: STD (X) Change () Addition
Name: ACOSTA, LUIS F
Address: 1110 BRICKELL AVENUE SUITE 804
City-St-Zip: MIAMI, FL 33131

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: ALFREDO ACOSTA

PD

05/31/2005

Electronic Signature of Signing Officer or Director

Date