2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000040794

Entity Name: OMNI CONSULTING PARTNERS, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
8023 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109	7214 FISHER ISLAND DR FISHER ISLAND, FL 33109

Current Mailing Address:	**New Mailing Address:**
8023 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109	162 ROUTE 202 SOMERS, NY 10589

FEI Number: 04-3657300   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
SCHAEFFER, WARREN 8023 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 US	SCHAEFFER, WARREN 7214 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 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: WARREN SCHAEFFER   09/21/2005

Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:	**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**
Title: D ( ) Delete Name: SCHAEFFER, WARREN Address: 8023 FISHER ISLAND DRIVE City-St-Zip: FISHER ISLAND, FL 33109	Title: D (X) Change ( ) Addition Name: SCHAEFFER, WARREN Address: 7214 FISHER ISLAND DRIVE City-St-Zip: FISHER ISLAND, FL 33109

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: WARREN SCHAEFFER   D   09/21/2005

Electronic Signature of Signing Officer or Director   Date