2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071492

Entity Name: OMARIO CORPORATION

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 931 LYONS RD. 11348 ROYAL PALM BLVD CORAL SPRINGS, FL 33065 #4106 COCONUT CREEK, FL 33063 **New Mailing Address: Current Mailing Address:** PO BOX 540841 LAKE WORTH, FL 33454 FEI Number: 41-2100634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

in the State of Florida.

SIGNATURE:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Date

Title: PSTD () Delete Title: **PSTD** (X) Change () Addition MORRIS, OMAR O MORRIS, OMAR O Name: Name: 931 LYONS RD., #4106 11348 ROYAL PALM BLVD Address: Address: City-St-Zip: COCONUT CREEK, FL 33063 City-St-Zip: CORAL SPRINGS, FL 33065

 Title:
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 () Delete
 Title:
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 (X) Change () Addition

 Name:
 MORRIS, NICOLA S
 Name:
 MORRIS, NICOLA S

 Address:
 931 LYONS RD., #4106
 Address:
 11348 ROYAL PALM BLVD

Address: 931 LYONS RD., #4106 Address: 11348 ROYAL PALM BLVD
City-St-Zip: COCONUT CREEK, FL 33063 City-St-Zip: CORAL SPRINGS, FL 33065

 Title:
 MD
 () Delete
 Title:

 Name:
 WILSON, DWIGHT A
 Name:

 Address:
 3480 PINEWALK DR N, # 114
 Address:

 City-St-Zip:
 MARGATE, FL 33063
 City-St-Zip:

Electronic Signature of Registered Agent

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: OMAR MORRIS PRES 04/25/2005