


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000115513
 1. Entity Name
OM INTERNATIONAL TRADING CO.



Principal Place of Business Mailing Address
103 MC DONALD ROAD **103 MC DONALD ROAD**
PLANT CITY, FL 33567 **PLANT CITY, FL 33567**

DO NOT WRITE IN THIS SPACE



04142006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
20-0312858 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
DEVPRASAD, DEVSWARUPDAS
103 MCDONALD ROAD
PLANT CITY, FL 33567

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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: DEV SWARUPDAS
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: 4-17-06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DEVSWARUPDAS, DEVPRASAD
STREET ADDRESS	103 MCDONALD ROAD
CITY-ST-ZIP	PLANT CITY, FL 33567
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000522257
 05/03/06-80020-018 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: DEV SWARUPDAS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 4-17-06 Daytime Phone #