

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000007941

**FILED**  
**Oct 20, 2006**  
**Secretary of State**

**Entity Name:** OMNI COMMERCIAL PROPERTIES, INC.

**Current Principal Place of Business:**

2020 W BEARSS AVE  
TAMPA, FL 33618

**New Principal Place of Business:**

15438 N. FLORIDA AVENUE  
SUITE 140  
TAMPA, FL 33613

**Current Mailing Address:**

16528 N DALE MABRY HWY  
TAMPA, FL 33618

**New Mailing Address:**

13014 N. DALE MABRY  
SUITE 523  
TAMPA, FL 33618

**FEI Number:** 14-1901447

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SANDERS, WALTER  
16528 N DALE MABRY WAY  
TAMPA, FL 33618 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: WALTER SANDERS

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: D ( ) Delete  
Name: CULLIGAN, WILLIAM D  
Address: 2020 W BEARSS AVE  
City-St-Zip: TAMPA, FL 33618

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CULLIGAN, WILLIAM D  
Address: 15438 N. FLORIDA AVENUE  
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: WILLIAM D. CULLIGAN

D

10/20/2006

Electronic Signature of Signing Officer or Director

Date