


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90035 001 ***150.00

DOCUMENT # P04000034214	
1. Entity Name OMEGA MARINE ENTERPRISES INC.	

Principal Place of Business 4050 N 30TH AVE HOLLYWOOD, FL 33020	Mailing Address 4050 N 30TH AVE HOLLYWOOD, FL 33020
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2. Principal Place of Business - No P.O. Box # 1841 NW 99TH Avenue	3. Mailing Address 1841 NW 99TH Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Plantation FL	City & State Plantation, FL
Zip 33322	Country USA

6. Name and Address of Current Registered Agent NOMIKOS, JACK 1841 NW 99TH AVENUE PLANTATION, FL 33322	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NOMIKOS, SPYROS 1841 NW 99TH AVENUE PLANTATION, FL 33322 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO NOMIKOS, JACK 1841 NW 99TH AVENUE PLANTATION, FL 33322 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:  **3/25/2008** **954782828**
Date Date and Phone