


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 05, 2006 8:00 am**  
**Secretary of State**

05-05-2006 90174 007 \*\*\*150.00

<b>DOCUMENT # P04000055626</b> Entity Name <b>OMESPECT LENDING CORP.</b>	
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Principal Place of Business 6731 FLICKER LANE HUDSON, FL 34667	Mailing Address 6731 FLICKER LANE HUDSON, FL 34667
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04282006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 48-1262080	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

LICCIARDELLO, ROBERT PRES  
 6731 FLICKER LANE  
 HUDSON, FL 34667

**DO NOT WRITE IN THIS SPACE**

6. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 NAME STREET ADDRESS CITY - ST - ZIP	PRES LICCIARDELLO, ROBERT 6731 FLICKER LANE HUDSON, FL 34667
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LICCIARDELLO, ROBERT V 21319 HOPSON RD. LAND O' LAKES, FL 34639
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TRES LANNO, HENRY 606 S. OREGON AVE. TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC LANNO, NANCY 606 S. OREGON AVE. TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 149, 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 sole proprietor or partner in the partnership or the registered agent of the corporation or the registered agent of the partnership; and that my name appears in Block 10 or Block 11 if applicable, or on the attachment with a power of attorney if I am not a member of the corporation.

SIGNATURE: 

4/28/06 813-884-7138