

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000161340

FILED  
Apr 06, 2006  
Secretary of State

Entity Name: OMG SERVICES CORPORATION

## Current Principal Place of Business:

4344 NW 9TH AVE  
POMPANO BEACH, FL 33064 US

## New Principal Place of Business:

4040 NE 4TH TERRACE  
POMPANO BEACH, FL 33064 US

## Current Mailing Address:

4344 NW 9TH AVE  
POMPANO BEACH, FL 33064 US

## New Mailing Address:

4040 NE 4TH TERRACE  
POMPANO BEACH, FL 33064 US

FEI Number: 20-1969360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION  
1261 E SAMPLE RD  
POMPANO BEACH, FL 33064 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete  
Name: DE OLIVEIRA, OLDAIR JOSE  
Address: 4344 NW 9TH AVE  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: VD ( ) Delete  
Name: DOS SANTOS OLIVEIRA, GLEICIONE M  
Address: 4344 NW 9TH AVE  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: TD ( ) Delete  
Name: DE OLIVEIRA, JOVAN BATISTA  
Address: 4344 NW 9TH AVE  
City-St-Zip: POMPANO BEACH, FL 33064 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition  
Name: DE OLIVEIRA, OLDAIR JOSE  
Address: 4040 NE 4TH TERRACE  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: VD (X) Change ( ) Addition  
Name: DOS SANTOS OLIVEIRA, GLEICIONE M  
Address: 4040 NE 4TH TERRACE  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: TD (X) Change ( ) Addition  
Name: DE OLIVEIRA, JOVAN BATISTA  
Address: 4040 NE 4TH TERRACE  
City-St-Zip: POMPANO BEACH, FL 33064 US

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: OLDAIR JOSE DE OLIVEIRA

P,D

04/06/2006

Electronic Signature of Signing Officer or Director

Date