## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000017960

Entity Name: OMSAICA CORP

FILED Apr 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

185 SE 14 TERR UNIT 1401 8290 LAKE DRIVE

MIAMI, FL 33131 #138

DORAL, FL 33166

**Current Mailing Address: New Mailing Address:** 

8290 LAKE DRIVE

#138

DORAL, FL 33166 US

FEI Number: 20-2949867 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WESTON CORPORATE ADMINISTRATION LLC TERAN, SONIA 17150 ROYAL PALM BLVD 8290 LAKE DRIVE

SUITE 4 #138

WESTON, FL 33326 US DORAL, FL 33166 US

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: SONIA TERAN 04/28/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title: GARCIA, JOSE M GARCIA, JOSE M Name: Name:

185 SE 14 TERR UNIT 1401 8290 LAKE DRIVE, #138 Address: Address: DORAL, FL 33166 City-St-Zip: MIAMI, FL 33131 City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition

Name: TERAN, SONIA Name: TERAN, SONIA 185 SE 14 TERR UNIT 1401 8290 LAKE DRIVE, #138 Address: Address:

MIAMI, FL 33131 DORAL, FL 33166 City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition TERAN, SONIA TERAN, SONIA Name: Name:

8290 LAKE DRIVE, #138 185 SE 14 TERR UNIT 1401 Address Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: DORAL, FL 33166

Title: VΡ (X) Delete Title: () Change () Addition

ORELLANA, SANDRA Name: Name: Address: CANONIGOS EDF-CENTRO IMPORTADOR ABANICO, Address: City-St-Zip: PISO 11 OFICINA 114, CARACAS, VZ City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: SONIA TERAN 04/28/2009