

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 DEC -3 PM 2:34

DOCUMENT # P05000023087

1. Entity Name
ONM INTERNATIONAL INC.



Principal Place of Business
520 BRICKELL KEY DR SUITE 0-305
MIAMI, FL 33131

Mailing Address
520 BRICKELL KEY DR SUITE 0-305
MIAMI, FL 33131



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

11092007 Chg-P CR2E034 (12/06)

4. FEI Number
20-2333932

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TRANSGLOBAL CORPORATE ADMINISTRATION LLC
520 BRICKELL KEY DR SUITE 0-305
MIAMI, FL 33131

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME VARGAS, CARLOS A
STREET ADDRESS 520 BRICKELL KEY DR SUITE 0-305
CITY-ST-ZIP MIAMI, FL 33131

TITLE President ☐ Change ☒ Addition
NAME Camilo Garcia
STREET ADDRESS 520 Brickell Key Dr. Ste. 0-305
CITY-ST-ZIP Miami, FL 33131

TITLE D ☐ Delete
NAME ORTIZ, CARLOS
STREET ADDRESS 520 BRICKELL KEY DR SUITE 0-305
CITY-ST-ZIP MIAMI, FL 33131

TITLE Secretary ☐ Change ☒ Addition
NAME Carlos Vargas
STREET ADDRESS 520 Brickell Key Dr. Ste. 0-305
CITY-ST-ZIP Miami, FL 33131

TITLE P ☒ Delete
NAME VARGAS, CARLOS A
STREET ADDRESS 520 BRICKELL KEY DR. SUITE 0-305
CITY-ST-ZIP MIAMI, FL 33131

TITLE ☐ Change ☐ Addition
NAME 800113157388
STREET ADDRESS 12/14/07--01041--015 **\$61.25
CITY-ST-ZIP

TITLE DS ☐ Delete
NAME PAROD, JUAN ANTONIO
STREET ADDRESS 520 BRICKELL KEY DR. SUITE 0-305
CITY-ST-ZIP MIAMI, FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME GARCIA, MAURICIO
STREET ADDRESS 520 BRICKELL KEY DRIVE, SUITE 0-305
CITY-ST-ZIP MIAMI, FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: X CARLOS ORTIZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/08/2007

Date

Daytime Phone #