2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082543

Entity Name: OMAR ASSOCIATES INC.

FILED Mar 21, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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113 SE CROSSPOINT DRIVE 3650 MCCLAREN WAY

PORT ST LUCIE, FL 34983 US US LAWRENCEVILLE, GA 30044

Current Mailing Address: New Mailing Address:

113 SE CROSSPOINT DRIVE 3650 MCCLAREN WAY

PORT ST LUCIE, FL 34983 US LAWRENCEVILLE, GA 30044 US

FEI Number: 20-2982016 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET

THE GREEN SPOT COMPANY TALLAHASSEE, FL 32301 751 SE PORT ST LUCIE BLVD US

PORT ST LUCIE, FL 34984 US

MACK, SHARON J

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: SHARON J MACK 03/21/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

BASHER, BONNIE BASHER, BONNIE Name: Name: 113 SE CROSSPOINT DRIVE 3650 MCCLAREN WAY Address: Address:

City-St-Zip: PORT SAINT LUCIE, FL 34983 US City-St-Zip: LAWRENCEVILLE, GA 30044 US

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

Name: HARRIS, OMAR Name: 1305 SANDPIPER LANE Address: Address: LILBURN, GA 30047 US City-St-Zip: City-St-Zip:

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

BUCKINGHAM, RHONDA Name: Name: 525 B CENTER STREET Address: Address: City-St-Zip: CHULA VISTA, CA 91910 US City-St-Zip:

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: BONNIE BASHER 03/21/2006 D