

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000077388

**FILED**  
**Jan 07, 2008**  
**Secretary of State**

**Entity Name:** OMNI CAPITAL DEVELOPMENT, INC.

## **Current Principal Place of Business:**

4044 W. LAKE MARY BLVD.  
SUITE 425  
LAKE MARY, FL 32746

## **New Principal Place of Business:**

4044 W. LAKE MARY BLVD.  
SUITE 426  
LAKE MARY, FL 32746

## **Current Mailing Address:**

4044 W. LAKE MARY BLVD.  
SUITE 425  
LAKE MARY, FL 32746

## **New Mailing Address:**

4044 W. LAKE MARY BLVD.  
SUITE 426  
LAKE MARY, FL 32746

**FEI Number:** 20-5041170

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## **Name and Address of Current Registered Agent:**

OLIVOS, JAMES  
4044 W. LAKE MARY BLVD.  
SUITE 425  
LAKE MARY, FL 32746 US

## **Name and Address of New Registered Agent:**

OLIVOS, JAMES  
4044 W. LAKE MARY BLVD.  
SUITE 426  
LAKE MARY, FL 32746 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: JAMES OLIVOS

01/07/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

## **OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: OLIVOS, JAMES  
Address: 4044 W. LAKE MARY BLVD., SUITE 425  
City-St-Zip: LAKE MARY, FL 32746

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: OLIVOS, JAMES  
Address: 4044 W. LAKE MARY BLVD., SUITE 426  
City-St-Zip: LAKE MARY, FL 32746

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.

SIGNATURE: JAMES OLIVOS

P

01/07/2008

Electronic Signature of Signing Officer or Director

Date