

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000147875

FILED
Jul 03, 2009
Secretary of State

Entity Name: OMEGA SYSTEMS CONSULTANTS, INC.

Current Principal Place of Business:

3020 PENN AVENUE
WYOMISSING, PA 19610

New Principal Place of Business:

28331 SOUTH TAMIAMI TRAIL SUITE 3
BONITA SPRINGS, FL 34134

Current Mailing Address:

3020 PENN AVENUE
WYOMISSING, PA 19610

New Mailing Address:

FEI Number: 20-8100777 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPINE, MATTHEW B
28331 SOUTH TAMIAMI TRAIL SUITE 3
BONITA SPRINGS, FL 34134 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: KIRITSIS, VASILIOS
Address: 35 PACIFIC AVENUE
City-St-Zip: SINKING SPRING, FL 19608

Title: DVP () Delete
Name: PHILLIPINE, MATTHEW B
Address: 15444 PUFFIN DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DS () Delete
Name: KIRITSIS, JENNIFER
Address: 35 PACIFIC AVENUE
City-St-Zip: SINKING SPRING, FL 19608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: VASILIOS KIRITSIS

Electronic Signature of Signing Officer or Director

PRES

07/03/2009

Date