2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P08000062668

Entity Name: CORPORACION OMNI 2010, INC.

Current Principal Place of Business:

111 WOODSMUIR CT.
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

111 WOODSMUIR CT.
PALM BEACH GARDENS, FL 33418 US

Current Mailing Address:

111 WOODSMUIR CT.
PALM BEACH GARDENS, FL 33418

New Mailing Address:

111 WOODSMUIR CT.
PALM BEACH GARDENS, FL 33418 US

FEI Number: 26-2908352 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREENSSPOON MARDER, P.A.
100 W CYPRESS CREEK ROAD SUITE 700
FT LAUDERDALE, FL 33309 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MAGNOU, JEAN
Address: AVENIDA SUR 10 VILLA ARAGUANEY NR. 22-38
City-St-Zip: LOS NARANJOS DEL CAFETAL, XX

Title: D ( ) Delete
Name: MAGNOU, SABINE
Address: AVENIDA SUR 10 VILLA ARAGUANEY NR 22-38
City-St-Zip: LOS NARANJOS DEL CAFETAL, XX

Title: D ( ) Delete
Name: MAGNOU, MAXENCE R
Address: 11015 LEGACY LANE UNIT 26-204
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MAGNOU, JEAN
Address: 1 ALLEE DE LA GRENOUILLE
City-St-Zip: LEZ EYZIES DE TAYAC, FR 24620 FR

Title: D (X) Change ( ) Addition
Name: MAGNOU, SABINE
Address: 1 ALLEE DE LA GRENOUILLE
City-St-Zip: LEZ EYZIES DE TAYAC, FR 24620 FR

Title: PD (X) Change ( ) Addition
Name: MAGNOU, MAXENCE R
Address: 111 WOODSMUIR CT.
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: MAXENCE R. MAGNOU PD 04/30/2009

Electronic Signature of Signing Officer or Director — Date