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FILED  
May 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P92000003618 (5)

1. Corporation Name

OMNI BUSINESS CONSULTANTS, INC.



Principal Place of Business

Mailing Address

10117 W. OAKLAND PARK BLVD.  
#213  
SUNRISE FL 33351

10117 W. OAKLAND PARK BLVD.  
#213  
SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/04/1992

2. Principal Place of Business

2a. Mailing Address

21 8357 W. FLAGLER ST

26 8357 W. FLAGLER ST

4. FEI Number

65-0368707

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

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

23 STE #129

27 STE #129

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

23 City & State

27 City & State

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

23 MIAMI, FL

27 MIAMI, FL

24 Zip 33144

25 Country MIAMI-DADE

29 Zip 33144

30 Country MIAMI-DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GARCIA, RAMON  
8340 S.W. 96TH ST.  
MIAMI FL 33156

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Murray Weg*

MURRAY WEG C.F.O.

4/28/98

Signature, typed or printed name of registered agent and then applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME WEG, MURRAY  
STREET ADDRESS 3001 S. OCEAN DR. #11E  
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D  
NAME SILVERSTEIN, IRVING  
STREET ADDRESS 9850 N.W. 31ST PLACE  
CITY-ST-ZIP SUNRISE FL 33351

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Murray Weg* MURRAY WEG C.F.O. 4/28/98 (905) 270-3241

CR2E034 (10/97)