

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90026 008 ***600.00

DOCUMENT # P93000000029

1. Corporation Name
OMNIAFAX, INC.

Principal Place of Business

601 SOUTH BLVD.
1ST FLOOR
TAMPA FL 33606-2677
US

Mailing Address

601 SOUTH BLVD.
1ST FLOOR
TAMPA FL 33606-2677
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1992

4. FEI Number

65-0379746

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BOGGS, DAVID M
111 MADISON STREET
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name RORRER, STEVEN M.
82 Street Address (P.O. Box Number is Not Acceptable)
3821 SAN PEDRO ST.
83
84 City TAMPA FL 85 Zip Code 33629

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
RD	CASWELL, JOHN B	601 SOUTH BOULEVARD 2ND FLOOR	TAMPA FL 33606-2677	<input checked="" type="checkbox"/>
VSD	CASWELL, HEATHER L	601 SOUTH BOULEVARD 2ND FLOOR	TAMPA FL 33606-2677	<input type="checkbox"/>
TD	RORRER, STEVEN M	601 SOUTH BOULEVARD 2ND FLOOR	TAMPA FL 33606-2677	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D		3435 BAYSHORE BLVD., #1500	TAMPA, FL 33629	<input checked="" type="checkbox"/>
D		3435 BAYSHORE BLVD., #1500	TAMPA, FL 33629	<input checked="" type="checkbox"/>
T		3821 SAN PEDRO ST.	TAMPA, FL 33629	<input checked="" type="checkbox"/>
	BAUER, BARBARA A.	9223 HICKORY RIDGE DRIVE	VALERGO, FL 33594	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	ORCHARD, JAMES A.	4320 CARROLLWOOD VILLAGE DR.	TAMPA, FL 33624	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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, with all other like empowered.

SIGNATURE:

STEVEN M. RORRER

7/31/99

(813)254-9441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)