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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 30 1997 8:00am

Secretary of State

561-433-0042

1/16/97

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Mailing Address

5700 LAKE WORTH ROAD

LAKE WORTH FL 33463-3275

SUITE 310

## DOCUMENT # P9300003952 (7)

## **OMUS CORPORATION**

Principal Place of Business

**5700 LAKE WORTH ROAD** 

LAKE WORTH FL 33463

SIGNATURE:

SUITE 310

US US			•	3. Date incorporated or Qualified 3a 01/13/1993	Date of Last Report     07/22/1996	
2. Principal P	Principal Place of Business 2a. Mailing Addr		ss		4. FEI Number	Applied For
26					11-3132820	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State         City & State           23         28				, , , , , , , , , , , , , , , , , , , ,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip Cou		ntry	This corporation has liability for intangible tax under s. 199.032,     Florida Statutes	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	ered Agent
LEW	VIS, RICHARD C			81 Name	•	
799 BRICKELL PLAZA				82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
SUITE 702				311661 Addi	ress (r.o. box radinader is radi radicplable)	
MIAMI FL 33131				83		
				84 City		FL 85 Zip Code
	10	00 1007 1500 51 1 00 1 1			poration submits this statement for the purpo	
office or r agent. I a	registered agent, or both, in the Stat en familiar with, and accept the oblig	e of Florida. Such change was a	authorized	l by the corporat	tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE Signature: type of or printed name of registing algerit and talle if applicable (NOTE: Registered Agen				Agent signature requir	red when reinstaling) D/	ATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	☐ DELETE	1.1 707	LE		Change Addition
NAME	BERNSTEIN, MICHAEL E		1.2 NA	ME		
STREET ADDRESS	5700 LAKE WORTH ROAD S	SUITE 310	1.3 STI	REET ADDRESS		
CITY - ST - ZIP	LAKE WORTH FL		1.4 CI3	Y-ST-ZIP		
TITLE	D	☐ DELETE	2 1 TIT	LE		Change Addition
NAME	BERNSTEIN, LOUIS	a salamanta da a da	22 NA	ME		
STREET ADDRESS				REET ADDRESS	•	
CITY - S1 - ZIP	LAKE WORTH FL		_	TY-ST-ZIP		
FITLE	D	☐ DELETE	3 1 TIT	LE		Change Addition
NAME	BERNSTEIN, SARA		32 NA	ME [		
STREET ADDRESS	5700 LAKE WORTH ROAD S	UITE 310	3 3 ST	REET ADDRESS		
CITY - ST - 712	LAKE WORTH FL		_	TY-ST-ZIP		
TRILE		☐ DELETE	4.1 7(7	LE		Change Addition
NAME			4. 2 N/	AME		
STREET ADDRESS			4.3 ST	reet address		
CITY-ST-7:P				Y-ST-ZIP	···	
TITLE		☐ DELETE	5.1 TIT	LE		Change Addition
NAME			5.2 NA	ME		
STREET ADDRESS	Į.		5.3 ST	REET ADDRESS		
CITY - ST - ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	6.1 1(1	LE		Change Addition
NAME			6.2 NA	ME		
STREET ADDRESS	}		6.3 ST	REET ADDRESS		
1	}		<b>5</b>			\

14. I do 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.