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

PROFIT CORPORATION ANNUAL REPORT 1998

STREET ADDRESS

SIGNATURE:

CITY - ST - ZIP



**FILED** 

Jan 23 1998 8:00am

Secretary of State

561-433-0042

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000003952 (7)

OMUS CORPORATION						
						1
Principal Place of Business Mailing Address						•
5700 LAKE WORTH ROAD 5700 LAKE WORTH ROAD						
SUITE 310 SUITE 310 LAKE WORTH FL 33463 LAKE WORTH FL 33463					DO NOT WRITE IN THIS SPACE	
US US					3. Date incorporated or Qualified	一一
					01/13/1993	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied Fo	or
21		26			11-3132820 Not Applic	able
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional	al
22		27			Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	,
Zip Country		Zip Country			Trust Fund Contribution Added to Fees	
<b>⊢</b> — '			<b>⊢</b>	ту	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No	
24	25 29 30 30 9. Name and Address of Current Registered Agent		301		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
	<del></del>	- Cognition of Agont	8	1 Name	10. Titalio dila produccio di Toli Tolico Con Pigotti	
I .	VIS, RICHARD C					
799 BRICKELL PLAZA SUITE 702			8	2 Street A	Address (P.O. Box Number is Not Acceptable)	Ì
MIAMI FL 33131			8	3		
1911/	WW 1 E 05101		$\perp$		· · · · · · · · · · · · · · · · · · ·	
1			8	4 City	FL 85 Zip Code	
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the abo	ve-named o		ered
office or se	egistered agent, or both, in the State of familiar with, and accept the oblid	of Florida. Such change was a ations of, Section 607,0505, Flo	authorized I orida Statut	by the corpo	corporation submits this statement for the purpose of changing its register oration's board of directors, i hereby accept the appointment as register	ed
SIGNATURE	, and accept the cong		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			- 1
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register				gent signature r	required when reinstating) DATE	
12.		D DIRECTORS	13,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Add	noitit
NAME	BERNSTEIN, MICHAEL E		1.2 NAM	- 1		
STREET ADDRESS	5700 LAKE WORTH ROAD S	SUITE 310	1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL	D per care	1.4 CITY			
TITLE	<u> </u>		2.1 TITLE 2.2 NAMI		Change Add	attion
NAME				-		
STREET ADDRESS 5700 LAKE WORTH ROAD SUITE 310				et address		
CiTY-ST-ZIP TITLE	<del></del>		2.4 CITY 3.1 TITLE		Change Ado	dition
1			3.2 NAM	1	El Grange La Add	IIOIII
NAME CTREET ADDRESS	BERNSTEIN, SARA 5700 LAKE WORTH ROAD SI	IITE 210		ET ADDRESS		
STREET ADDRESS	LAKE WORTH FL	OIIE 910				
CITY-ST-ZIP	LANE WORTH PL	DELETE	3.4, CITY 4.1 TITLE		☐ Change ☐ Adu	dition
NAME			4.2 NAM			4.5.017
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			4.3 SINE	· · · · · · · · · · · · · · · · · · ·		
TITLE			5 1 TITLE		Change Ado	dition
NAME		<u> </u>	5 2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Ado	dition
NAME			6.2 NAM		_ • _	

6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 an attachment with an address.