CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE

FILED Apr 09 1997 8:00am Secretary of State

1. Corporation Name OMEGA MACHINERY SERVICES, INC. Principal Place of Business Mailing Address 2574 ROCKFILL RD. 2574 ROCKFILL RD.										
2574 ROCKFILL RD. 2574 ROCKFILL RD. FT. MYERS FL 33619 FT. MYERS FL 33916-				24						
							3. Date Incorporated or Qualified 01/14/1994		ate of Last 01/1996	
2. Principal Place of Business		2a. Mailing	Address	•		4. FEI Number			Applied For	
1	44 . 4		26		·		65-0462332			Not Applicable
Suite, Apt	e, elc.		27 Suite, A	pt. #, etc.			5. Certificate of Status Desired			Additional Required
City & Sta	le		City & S	State			6. Election Campaign Financing			O May Be
3]			28				Trust Fund Contribution			d to Fees
Zip		Country	Zip		Count	try	8. This corporation has liability for			s. 199.032.
4	25	8 ddunen of Com-	29 ent Registered Ag		30		Florida Statutes 10. Name and Address of New Re	Yes		
	MAYER, DAVID	Address of Curn	ent Registered Ag	jeni		1 Name	10. Name and Address of New N	ağısıaren	Agent	
	4 ROCKFILL RO	AD			<u> </u>	O Circo Add	free (D.O. Day N. Jahar in Nat Assessed	. Link		
	MYERS FL 3391) e	Street Add	dress (P.O. Box Number is Not Accepta	шөј		
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					ä	4 City			85 Zi	p Code
					٦	J.,		FL.	. 1 1	•'
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11. Pursuant office or	to the provisions or	of Sections 607.05 or both, in the Sta	502 and 607.1508, te of Florida. Such	Florida Statut change was	es, the abo authorized	ve-named cor by the corpora	poration submits this statement for the ation's board of directors. I hereby acce	purpose of	changing ointment	its registered as registered
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SIGNATURE		ted name of registered a	502 and 607,1508, the of Florida, Such igations of, Section agent and life if applicable ND DIRECTORS				poration submits this statement for the ation's board of directors. I hereby acceused when reinstaling) ADDITIONS/CHANGES TO OFF	DATE		
SIGNATURE	Standare typed or privi	od name of represent a OFFICERS A	agent and title if applicable		E Registered A	Agent signature requ	uired when reinstaling)	DATE		ORS IN 12
11. Pursuant office or agent 1 a	Statistical typical or print P ORTMAYER, C	OFFICERS A	agent and title if applicable	(NOT	E Registered A	Agent signature requ	uired when reinstaling)	DATE	D DIRECTO	ORS IN 12
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SIGNATURE 12. THE NAME STREET ADDRESS CITY ST-200	P ORTMAYER, C 2574 ROCKFII FORT MYERS VPT	OFFICERS A DAVID A LL ROAD FL	agent and late if applicable	(NOT	E Registered A 13. 1.1 TITLI 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLI	Agent signature required to the signature re	uired when reinstaling)	DATE	D DIRECTO	ORS IN 12 e Addition
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Lam an officer or director appears in Block 12 or B

SIGNATURE:

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