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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000014824 (4)

OMEGA REALTY & DEVELOPMENT CO.

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May 05 1997 8:00am
Secretary of State



Date

Daylime Priorie #

|  | ce of Business   |   | Mailing                                 | Address                        |  |   | l                   |   |                   |              |                                       |  |
|--|--|---|---|--------------------------------|--|---|---------------------|---|-------------------|--------------|---------------------------------------|--|
| 2910 BAY TO  | BAY BLVD   |   | 2454 MO                                 | MULLEN BOOTH                   | RD.  |   |                     |   |                   |              |                                       |  |
| 205  |  |   | 421                                     |                                |  |   | ļ                   |   |                   |              |                                       |  |
| TAMPA FL 33629<br>US   |  |   | ÇLEARW<br>US                            | CLEARWATER FL 34619-1339       |  |   |                     | Data Incompany                          | مع مع المعالق ع   | Ta. 0.       | 41 ( 4 C                              |  |
|  |  |   |   |                                |  |   |                     | Date Incorporate 02/23/1994             | ed or Qualified   |              | te of Last R<br>1/1996                | epon                                   |
|  | Place of Busine  |   | 1                                       | ing Address                    |  |   | 4.                  | FEI Number                              |                   |              |                                       | oplied For                             |
|  |  | Booth Rd  |   | 4 McMull                       | en Boo   | th Rd   |                     | <u>59-3246514</u>                       | <u> </u>          |              |                                       | ot Applicable                          |
| Suite, Ap<br>422   |  |   | Suite<br>27                             | e, Apt. #, etc.<br>422         |  |   | 5.                  | Certificate of Sta                      | atus Desired      |              |                                       | Additional<br>equired                  |
| Cily & Sla   |  |   |   | & State                        |  |   | 6.                  | Election Campa                          | ian Financino     |              | \$5.00                                | May Be                                 |
| Clear  | water.   | lorida  | 28 C1                                   | learwater                      | . Flor   | i da  | "                   | Trust Fund Cont                         |                   |              |                                       | to Fees                                |
| Zip  |  | Country   | Zip                                     | · <u></u>                      | Coun   |   | 8.                  | This corporation                        | has liability for | r intangible | tax under s                           | 199.032                                |
| 4 34619  | ) [2   | 5 USA   | 29 346                                  | <b>.10</b>                     | 30 11  | SA  |                     | Florida Statutes                        | -                 | Yes [        | ] No                                  |  |
|  | g, Name a  | 5 USA<br>and Address of Curr  | ent Registered                          | Agent                          |  | D21   | 10.                 | Name and Add                            | ress of New R     | eglatered A  | gent                                  |  |
| CO   | RPORATION  | INFORMATION SE  | RVICES INC.                             |                                | 8  | 1 Name  |                     |   |                   |              |                                       |  |
| 120  | HAYS ST.   |   |   |                                | l <sub>a</sub>   | 2 Street  | Address (F          | P.O. Box Number                         | is Not Accents    | able)        |                                       |  |
| TA   | LLAHASSEE F  | FL 32301  |   |                                | 1  | - 00.000  | , 200,000, (        | , C. DOX Manibor                        | io not necepta    | 20.07        |                                       |  |
| •  |  |   |   |                                | 6  | 3   |                     |   |                   |              | · · · · · · · · · · · · · · · · · · · | "                                      |
|  |  |   |   |                                | ļ.,  |   |                     |   |                   |              | Tan 1 30                              | <u> </u>                               |
|  |  |   |   |                                | 18   | 4 City  |                     |   |                   | FL           | 85 Zip                                | Code                                   |
| 11. Pursuan  | t to the provision   | ins of Sections 607.0   | 502 and 607.15                          | 08, Florida Statu              | tes, the abo   | ve-named  | corporatio          | on submits this sta                     | atement for the   | purpose of   | changing i                            | ts registered                          |
| office or  | registered age   | ins of Sections 607.0<br>int or both, in the Sta<br>n, and accept the obl   | ite of Florida. Su                      | Joh change was                 | authorized   | by the corp   | poration's t        | board of directors                      | s. I hereby acco  | ept the appo | ointment as                           | registered                             |
|  | SIGHT FOR UNION WHITE  | i, and accept the coi   | igations of, 566                        | 1100 007.0303, 11              | Oliva Statu  | .05.  |                     |   |                   |              |                                       |  |
|  |  | •   | •                                       |                                |  |   |                     |   |                   |              |                                       |  |
|  |  |   |   |                                | TE Registered  |   | required when       | n reinstation\                          |                   | DATE         | <del> </del>                          |  |
| SIGNATURE  |  | r printed hanki of registered .   | agent and tille if appli                | cable (NO                      | TE: Registered /   |   |                     |   | NGES TO OFF       | DATE         | DIRECTOR                              | RS IN 12                               |
| SIGNATURE  |  | r printed hanki of registered .   |   | cable (NO                      | TE: Registered /   | gent signature  |                     | n reinstating)<br>ADDITIONS/CHA         | NGES TO OFF       |              | DIRECTOR                              |  |
| SIGNATURE  12. TITLE   | Signature, typest o  | or printed hanks of registered .<br>OFFICERS A  | agent and tille if appli                | cable (NO                      | 13.  | gent signature  | P                   | ADDITIONS/CHA                           |                   |              |                                       |  |
| SIGNATURE  12. TILLE MAYE  | Signature, typical o   | OFFICERS A  | agent and tille if appli                | cable (NO                      | 13.<br>1.1 TITL<br>1.2 NAM   | gent signature  | P.<br>Willi         | ADDITIONS/CHA                           | Gee               | ICERS AND    | Change                                |  |
| SIGNATURE  12. TITLE MAVE STREET ADDRESS   | P<br>MARTIN, D<br>461 SEVE   | OFFICERS A  NAVID E  N AVE  | agent and tille if appli                | cable (NO                      | 13.<br>1.1 TITL<br>1.2 NAM<br>1.3 STRI   | ent signature  E  ET ADDRESS  | P.<br>Willi<br>2454 | additions/cha<br>lam D. McG<br>McMullen | Gee<br>Booth Re   | CERS AND     | Change                                |  |
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| SIGNATURE  112.  THEF  NAME  STREET ADDRESS  CHY-SI-ZIP  THEF  | P<br>MARTIN, D<br>461 SEVEL<br>TAMPA FL<br>VST   | OFFICERS A  NAVID E  N AVE  | agent and tille if appli                | cable (NO                      | 13.<br>1.1 TITL<br>1.2 NAM<br>1.3 STRI<br>1.4 CITY<br>2.1 TITL   | E<br>E<br>EET ADDRESS<br>- ST-ZIP   | P.<br>Willi<br>2454 | additions/cha<br>lam D. McG<br>McMullen | Gee<br>Booth Re   | CERS AND     | Change                                | Additio                                |
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| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE                            | P MARTIN, E 461 SEVEL TAMPA FL VST TOULOUM 406 WEST SAFETY H D TOULOUM 406 WEST SAFETY H D TRAN, BUIL 2664 MCM CLEARWA   | OFFICERS A OFFICERS A NAVID E N AVE  IIS, GEORGE E BOROUGH LANE ARBOR FL IIS, WILLIAM E BOROUGH LANE ARBOR FL 34695 U N IULLEN BOOTH R            | agent and tile if appli<br>IND DIRECTOR | DELETE  DELETE  DELETE  DELETE | 13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY 6.1 TITL 6.2 NAM   | E E ET ADDRESS -ST-ZIP E ET ADDRESS (-ST-ZIP E ET ADDRESS (-ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP | P.<br>Willi<br>2454 | additions/cha<br>lam D. McG<br>McMullen | Gee<br>Booth Re   | CERS AND     | Change Change Change Change Change    | Additio                                |

OF SIGNING OFFICER OR DIRECTOR