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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P94000080541 (3)

FILED Apr 30 1998 8:00am Secretary of State

OMNI R	ASP ENTERPRISES, INC.					
Principal Place	of Business	Mailing Address	*		- 100%(000) (100 100) 0 100 1 000) (100) (000) (000)	LOTEL BOTEL GELLE MENDE HAL LOGI
5364 SYRACUS VENICE FL 34		5384 SYRACUSE RD. VENICE FL 34293		DO NOT WRITE IN TH	S SPACE	
					3. Date Incorporated or Qualified	
					10/31/1994	
¬ ≟ .	ace of Business	2a. Mailing Address		- 1	4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0531167	Not Applicable	
2		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
3		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the d	
4]_	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registers	d Agent
HADNAGY, JAMES R					tadnacy James	s. R.
4800 TIMBERLINE BLYD CHANGE to			82		ss (P.O. Box Number is Not Acceptable)	<u> </u>
VEN	NCE FL 34293			<u> 534</u>	18 Drew Ra.	
			83			
			84	City		85 Zip Code
		·	f 1	- 1 V	enice Fl F	L 34293
office or re	o the provisions of Sections 607,0502 gistered agent, or both, in the State on Infamiliar with, and accept the obligat	if Florida. Such change was a	uthorized by	named corpo the corporatio	ration submits this statement for the purpose on's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE .						
12.	Signature, typed or printed name of registered agent OFFICERS AND		Registered Agen	I signature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PC OTTOERS AND	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE IS A	Change Addition
NAME	HALL, KENNETH C		1.2 NAME	ŀ		
STREET ADDRESS	5364 SYRACUSE RD		1.3 STREET ADDRESS			
CITY-ST-ZIP	VENICE FL 34293		1.4 CITY - ST - ZIP			ļį
TITLE	☐ DELETE		2.1 TITLE			Change Addition
NAME			2.2 NAME	ì		Ì
TREET ADDRESS			2.3 STREET A	DDRESS		
CITY-ST-ZIP			2 4 City-St	-ZIP		
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	ļ		Ţ
STREET ADDRESS			3.3 STREET A	DDRESS		İ
CITY-ST-ZIP		Delete	3.4. CITY-ST	- 21P		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
TITLE		L DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4.2 NAME			ļ
STREET ADDRESS			4.3 STREET A			
CITY-ST-ZIP		DELETE	4.4 City-St-	- ZIP		Change Addition
TITLE		☐ been	5.1 TITLE 5.2 NAME	}		C Olkelike C Modeling
NAME OTDEET ADDRESS			5.3 STREET A	DDBEES		
STREET ADDRESS City-St-Zip				1		1
TITLE		DELETE	5.4 CITY - ST 6.1 TITLE	- CIL		Change Addition
NAME			6.2 NAME	-		
STREET ADDRESS			6.3 STREET A	DDRESS		Ì
CITY-ST-ZIP			64 CITY-ST-			
						

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 suppliernental 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 ex on an attachment with an address.

Ano 124 1098 (avil 1101-1120