2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2006
Secretary of State

DOCUMENT# P94000084148

Entity Name: O. M. NEOTECH, INC.

Current Principal Place of Business:

13005 SOUTHERN BOULEVARD
MEDICAL OFFICE BUILDING 2, SUITE 233
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

Current Mailing Address:

13005 SOUTHERN BOULEVARD
MEDICAL OFFICE BUILDING 2, SUITE 233
LOXAHATCHEE, FL 33470 US

New Mailing Address:

233 S.W. 79 AVE.
MIAMI, FL 33144 US

FEI Number: 65-0535811 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOREJON, ORLANDO
13005 SOUTHERN BOULEVARD
MEDICAL OFFICE BUILDING 2, SUITE 233
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

MOREJON, ORLANDO
233 S.W. 79 AVE.
MIAMI, FL 33144 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 08/25/2006
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MOREJON, ORLANDO
Address: 50 RUTLAND BOULEVARD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: V ( ) Delete
Name: LOPEZ, MARTA
Address: 3165 SW 133 PLACE
City-St-Zip: MIAMI, FL 33175

Title: S ( ) Delete
Name: MOREJON, ANNMARIE
Address: 50 RUTLAND BOULEVARD
City-St-Zip: WEST PALM BEACH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MOREJON, ORLANDO
Address: 233 S.W. 79 AVE.
City-St-Zip: MIAMI, FL 33144

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: MOREJON, ANNMARIE
Address: 233 S.W. 79 AVE.
City-St-Zip: MIAMI, FL 33144

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORLANDO MOREJON P 08/25/2006
Electronic Signature of Signing Officer or Director — Date