

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000001660

Entity Name: OMEGA MUSHROOMS, INC.

FILED
Mar 04, 2009
Secretary of State

Current Principal Place of Business:

2202 21ST STREET CTE
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 452
BRADENTON, FL 342060452 US

New Mailing Address:

FEI Number: 65-0566243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHANG, C L DR
2202 21ST STREET CTE
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHANG, CHIN-LWANG
Address: 2202 21ST STREET CTE
City-St-Zip: PALMETTO, FL 34221 US

Title: VSD () Delete
Name: HSU, RUDOPH S
Address: 9 ORCHAID ST
City-St-Zip: NEWTON, NJ 07860

Title: C () Delete
Name: KUO, CHIANG HAI
Address: 108 W. WILLIAMSBURG DRIVE
City-St-Zip: STARKVILLE, MS 39759

Title: TD () Delete
Name: CHANG, M. MAY
Address: 2202 21ST STREET CTE
City-St-Zip: PALMETTO, FL 34221 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHANG, CHIN-LUANG
Address: 2202 21ST STREET CTE
City-St-Zip: PALMETTO, FL 34221 US

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: CHIN LUANG CHANG

PD

03/04/2009

Electronic Signature of Signing Officer or Director

Date