PROFIT CORPORATION ANNUAL REPORT				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Socretary of State DIVISION OF CORPORATIONS								
DOCUMENT # P95000029109 (2)									ı			
•	OM, INC.											
rincipal Place of	if Business		 Mai	aling Address		<i>-</i>		_	1 14011001 110 10101 01111 08111 80.	78 11 111 1 4	184 1849 1844 1844 	14 EDITO IUIT 1881
4645 PARKBREEZE CT ORLANDO FL 32808-1044				4645 PARKBREE ORLANDO FL 33								
OMLANDO FL	. vesu0*1U44			16%					Date Incorporated or Qualified 04/10/1995	3a. [Date of Last Ro	
. Principal Plac	ce of Business		h	Mailing Address	S		, , , , , , , , , , , , , , , , , , , 		4, FEI Number 59-33-85 7	0	L	Applied For Not Applicable
Suite, Apt. #,			26	Suite, Apt. #. el	ito.				Certificate of Status Desired		\$8.75	Additional Required
City & State			27	City & State					Election Campaign Financing Trust Fund Contribution		\$5.00	0 May Be d to Fees
Z ₀	Co	ountry	28	Ζ φ		Count	try		8. This corporation has liability for		ole tax under s	
]	25 9 Name and A	Address of Current R	29 Regist	tered Agent	30	<u></u>			10. Name and Address of New F			
Pursuant to or registere familiar with	to the provisions of ed agent, or both, i h, and accept the o	Sections 607,0502 ar in the State of Honda obligations of Section	ind 60 Suct 607.	07.1508, Florida Ir change was a .0505, Florida St	Statutes, thuthorized by tatutes.	he aborry the cr	ve named orporation.	torpora s board	ation submits this statement for the pu d of directors. I hereby accept the app	urpose c pointmer	of changing its nt as registered	registered offic Lagent Lam
SIGNATURE _	Signature typeolor protes	d week of registers. Lager Carls			No TE FO		Agend Signer in	required s	International CHANGES TO OF	DATE		RS IN 12
12.		OFFICERS AND L			<u></u>	13.	N.F.	T	AUDITIONS/CHANGES TO OF	, IUERS	Change	Addition
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6.4 CHY - \$1 - 70°

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

64 CITY: \$1-2IP

14. I do hereby certify that the information supplied with this filing is votuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or tustee 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, or on an attachment with an address C407/244-4333

4/18/96