PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

10 JUN 25 AM 10:48

DOCUMENT # P10000031929

1. Corporation Name

Broadcast Marketing Group, Inc

700182621167
06/25/10--01027--011 **1050.00

CR2E081 (6/10)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
9992 SE 151 Place	PO Box 117
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Summerfield, Florida	City & State: Candler, Florida
Zip: 33491 / Country: USA	Zip: 32111 / Country: USA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: R H Alvarez

Street Address (P.O. Box Number Is Not Acceptable): 9992 SE 151 Place

Suite, Apt. #, Etc.

City: Summerfield | State: FL | Zip Code: 33491

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: R H Alvarez — Date: June 23, 2010

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	RH Alvarez	9992 SE 151 Place	Summerfield,FL 33491
		B. 6/30/10	
		REINSTATEMENT 08-10	

10. **E-mail Address:** omegafdn@gmail.com

(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: R H Alvarez — RH Alvarez — June 23.10

tel 386 467 2030