SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

* Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600000697 (8)

APPROVED ARD FILED



1997 JUL 25 PH 12: 19

SECRETARY OF STATE TALLAMASSEE, FLORIDA

OTC, II	VC.					 	I ARAN fi nn ar na a i	[1] [1] [1] [1]	
Principal Plac	a of Business	Mailing Address							
· •		-						,	
3702 SHELL COVE LANE 3702 SHELL CO ORLANDO FL 32817 ORLANDO FL 3									
1						DO NOT WRITE II			
						3. Date Incorporated or Qualified	3a. Date of La	ast Report	
		12 14 17 17 17 17 17 17 17 17 17 17 17 17 17				01/03/1996	L	· · · · · · · · · · · · · · · · · · ·	
	lace of Business	2s. Mailing Address	⊢ *			4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite Ant # etc	Suite, Apt. #, etc.			59-33553 8 5		Not Applicat 75 Additional	ble
22		27				5. Certificate of Status Desired	1 1 7	e Required	- 1
City & Stat	9	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zıp	Co	untry		8. This corporation owes or has paid	the current yea	r Intangible	
24	25	29	30			Personal Property Tax due June 3		□ No	
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Reg	Istered Agent		_
	rter, vicki l			81 N	ame				
3702 SHELL COVE LANE				82 S	reet Add	Address (P.O. Box Number is Not Acceptable)			\neg
OR	LANDO FL 32817			83					
				83					
				84 C	ity		FL 85	Zip Code	
44 Presupot	to the provisions of Spetions 607 060	12 and 607 1508 Florida Sta	tutes the	above ne	mod cott	poration submits this statement for the pu		na ite registore	0.0
office or r	egistered agent, or both, in the State	e of Florida. Such change wa	s authorize	ed by the	e corpora	tion's board of directors. I hereby accept	the appointmen	nt as registered	3
	m familiar with, and accept the oblig	lations of, Section 607.0505,	Fiorida St	atutes.					
SIGNATURE	Signature, typed or printed name of registered ago	ont and time if applicable (N	OTF Register	ed Agent sig	gnature requi	red when reinslating)	DATE		-
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN 12	
TITLE	D	☐ DELETE	1.1	TITLE			☐ Cha	• —	1.0
NAME	DARTER, VICKI L		1.2	NAME		9000022:	5820	93	2
STREET ADDRESS	3702 SHELL COVE LANE		1.3 3	STREET ADD	ress	-08/05/9			Ē
CITY-ST-ZIP	ORLANDO FL 32817			CITY-ST-ZII	·	****165	.00 ***		
TITLE		_		TITLE	l		☐ Cha	nge 🛄 Additi	ion C
NAME				NAME					ı
STREET ADDRESS				STREET ADD	1				
CITY-ST-ZIP		DELETE		CITY-ST-Z	P		Cha	npe Additi	ion
TITLE				TIFLE NAME	Ī			ngo <u>La</u> ndull	
STREET ADDRESS			1	nami: Street add	DESC				1
CITY-ST-ZIP				CITY-ST-ZI					
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NAME 1				NAME				• —	
STREET AD RESS				STREET ADD	RESS				
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TITLE		DELETE		TITLE			Cha	nge 🔲 Additi	ion
NAME			5.2 (NAME					
STREET ADDRESS			5.3	STREET ADD	ress				}
CITY-ST-ZIP			5.41	CITY-ST-ZII	<u> </u>				
TITLE		DELETE	6.1	TITLE			Cha	nge () Q Addin	on
NAME			6.24	NAME				143,649	L
STREET ADDRESS			6.3 \$	STREET ADD	RESS		•	(A)(A)	
				011V-51-78				- 14	

14. 1 do 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 supplemental 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, or on an intachment with an address.





OTC, INC. OMEGA TELECOM

July 22,1997

As per the conversation with Jane Spears today, I do not recall receiving a 1st notice. So enclosed is the check for \$165.00 as you instructed, please except as full payment.

Thank You,

Vicki Darter