2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000004420

Entity Name: OMEGA ONE PROPERTIES, INC.

FILED Apr 16, 2004 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|--|---------|---------------------|----------------------------------|-----------------------------------|
| 9910 TIMMONS RD THONOTOSASSA, FL | 33592 | US | | |
| Current Mailing Addre | ess: | | New Mailing Address: | |
| 9910 TIMMONS RD THONOTOSASSA, FL | 33592 | US | | |
| FEI Number: 59-3410645 | FEI Nu | ımber Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of | Current | Registered Agent: | Name and Address of N | ew Registered Agent: |
| SMITH, NORRIS L 9910 TIMMONS RD THONOTOSASSA, FL | 33592 | 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. | | | | |

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

SIGNATURE:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: PSTD () Delete Title: **PSTD** (X) Change () Addition HARRIS, SMITH NORRIS, SMITH L Name: Name: 9910 TIMMONS RD Address: 9910 TIMMONS RD Address: City-St-Zip: THONOTOSASSA, FL 33592 City-St-Zip: THONOTOSASSA, FL 33592

Title: PSTD () Delete Title: () Change () Addition

 Name:
 SMITH, NORRIS L
 Name:

 Address:
 9910 TIMMONS RD.
 Address:

 City-St-Zip:
 THONOTOSASSA, FL 33592
 City-St-Zip:

Electronic Signature of Registered Agent

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NORRIS L. SMITH PSTD 04/16/2004