2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 14, 2006
Secretary of State

DOCUMENT# P96000088900

Entity Name: OMNI LIFT INTERNATIONAL, INC.

Current Principal Place of Business:

9205 NW 101 ST.
MEDLEY, FL 33178

New Principal Place of Business:

8067 NW 54TH ST
MIAMI, FL 33143

Current Mailing Address:

9205 NW 101 ST.
MEDLEY, FL 33178

New Mailing Address:

8067 NW 54TH ST
MIAMI, FL 33143

FEI Number: 65-0702784 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VSTD ( ) Delete
Name: CASAS, RAYMOND
Address: 11437 SOUTHWEST 75 TERRACE
City-St-Zip: MIAMI, FL 33173

Title: PD ( ) Delete
Name: CASAS, JOHN M
Address: 11011 SW 65 STREET
City-St-Zip: MIAMI, FL 33173

Title: VD ( ) Delete
Name: MORRISON, LEONARD
Address: 1425 WEST 25 STREET
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: RAYMOND CASAS VSTD 09/14/2006

Electronic Signature of Signing Officer or Director Date