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FILED  
May 19 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000039172 (6)

1. Corporation Name

OMEGA INTERNATIONAL INVESTMENTS, INC.



Principal Place of Business

Mailing Address

1000 PALMWAY STREET  
KISSIMMEE FL 34744

1000 PALMWAY STREET  
KISSIMMEE FL 34744

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 220 NW 135 AVENUE

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FLORIDA

Zip

24 33182

Country

25 USA

2a. Mailing Address

26 220 NW 135 AVENUE

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FLORIDA

Zip

29 33182

Country

30 USA

3. Date Incorporated or Qualified

05/01/1997

4. FEI Number

59-3445270

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes

No

9. Name and Address of Current Registered Agent

MEDINA, MARYBEL  
220 N.W. 135 AVENUE  
MIAMI FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME MEDINA, MARYBELL  
STREET ADDRESS 220 NW 135 AVENUE  
CITY-ST-ZIP MIAMI FL 33182

TITLE ☒ DELETE

NAME RUIZ, ADRIANA  
STREET ADDRESS 10271 SW 58 STREET  
CITY-ST-ZIP MIAMI FL 33173

TITLE ☐ DELETE

NAME MEDINA, ORLANDO  
STREET ADDRESS 220 NW 135 AVE  
CITY-ST-ZIP MIAMI FL 33182

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME MEDINA, MARYBELL  
1.3 STREET ADDRESS 220 NW 135 AVENUE  
1.4 CITY-ST-ZIP MIAMI FL 33182

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME MEDINA, ORLANDO  
2.3 STREET ADDRESS 220 NW 135 AVENUE  
2.4 CITY-ST-ZIP MIAMI FL 33182

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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 attachment with an address.

SIGNATURE

4-20-98 (205) 551-9945

CR2E034 (10/97)