## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000046047

FILED May 01, 2008 Secretary of State

Entity Name: OMNI MANAGEMENT & CONSULTANTS UNLIMITED, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
160 INTER SUITE 140	RNATIONAL PK	WY			
	OW, FL 32746	US			
Current N	Mailing Address	s:	New Mailing Addre	ss:	
	RNATIONAL PK	WY			
SUITE 140 HEATHRO	DW, FL 32746	US			
FEI Number	r: 59-3515336	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
160 INTEŔ SUITE 150	, CAROL A RNATIONAL PA 0 DW, FL 32746				
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE:				
SIGNATU		c Signature of Registered Ag	ent	Date	
n accordar	Electroni	(2)(b), F.S., the corporation did no		Date	
In accordar Election Ca	Electroni	(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	ot receive the prior notice.	Date  GES TO OFFICERS AND DIRECTOR	
n accordar Election Ca OFFICER Title: Name: Address:	Electronince with s. 607.193 Impaign Financing IS AND DIRECT P () MCCLANDON, J	(2)(b), F.S., the corporation did not recovered to the contribution ( ).  CORS:  Delete  OEANN  DNAL PARKWAY	ot receive the prior notice.		
In accordar Election Ca	Electronince with s. 607.193 Impaign Financing IS AND DIRECT P () MCCLANDON, J 160 INTERNATION LAKE MARY, FL VP () JOHNSON, ROB	(2)(b), F.S., the corporation did not Trust Fund Contribution ( ).  **ORS:** Delete OEANN DNAL PARKWAY 32746  Delete ERT L DNAL PARKWAY	ot receive the prior notice.  ADDITIONS/CHANG  Title:  Name:  Address:	GES TO OFFICERS AND DIRECTOR	
In accordar Election Ca OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electroni nce with s. 607.193 mpaign Financing S AND DIRECT P () MCCLANDON, J 160 INTERNATIO LAKE MARY, FL VP () JOHNSON, ROB 160 INTERNATIO LAKE MARY, FL T () JOHNSON, DEB	(2)(b), F.S., the corporation did not Trust Fund Contribution ( ).  FORS:  Delete OEANN DNAL PARKWAY 32746  Delete ERT L DNAL PARKWAY 32746  Delete RA D DNAL PARKWAY	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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: CAROL BUFORD S 05/01/2008