2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

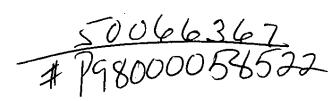
SIGNATURE:

Sep 12, 2005 8:00 am Secretary of State **DOCUMENT # P98000058522** 09-12-2005 90002 034 ***150.00 1. Entity Name ALPHA OMEGA SPECIALTY, INC. Principal Place of Business Mailing Address 981 CARDIGAN LN 981 CARDIGAN LN 50066367 PALM HARBOR, FL 34683 **SUITE 981** PALM HARBOR, FL 34683 09022005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3532193 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SHAH, CHETAN R DO NOT WRITE 981 CARDIGAN LN PALM HARBOR, FL 34683-6002 IN THIS SPACE 8. The above named entit nent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of hetan SIGNATURE (NOTE: Registered Agent signature required when FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the П Due by September 7, 2005 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS mF NAME PATEL, PALLAVI K STREET ADDRESS 981 CARDIGAN LN CITY-ST-ZIP PALM HARBOR, FL 346836002 PTS MILE NAME SHAH, CHETAN STREET ADDRESS 981 CARDIGAN LN CITY-ST-ZIP PALM HARBOR, FL 346836002 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filing coes not qualify 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 execurate and that my signature shall have the samelegal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

FILED

Daytime Phone #

ATTACHMENT



JACOBS ACCOUNTING, INC. 2121 MAIN STREET DUNEDIN, FL. 34698 727-210-2552 FAX # 727-210-2553

09/65/2005

FLORIDA DEPARTMENT OF STATE DIV. OF CORPORATIONS P. O. BOX 6327 TALLAHASSEE, FL. 32314

TO WHOM IT MAY CONCERN,

WE ARE REQUESTING THAT YOU WAVE THE PENALTIES FOR LATE FILING OF:

ALPHA OMEGA SPECIALTY, INC. SHAH BROTHERS OF TAMPA BAY, INC. UNUSUALLY UNITED UNIVERSE UNLIMITED, INC.

CHETAN SHAH NOTIFIED US THAT HE DID NOT RECEIVE THE NOTICES FOR FILING THE ANNUAL REPORTS.

ENCLOSED IS CHECK IN THE AMOUNT OF \$ 450.00 FOR THE FILING FEES FOR THE ABOVE CORPORATIONS.

PLEASE RETURN THE CERTIFICATE AND ARTICLES OF INCORPORATION TO:

JACOBS ACCOUNTING & COMPUTERS, INC. 2121 MAIN STREET DUNEDIN, FLORIDA 34698

IF YOU HAVE ANY QUESTIONS PERTAINING TO THIS MATTER PLEASE CALL 727-210-2552.

RESPECTFULLY SUBMITTED,

HARLEY JACOBS