

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000000087

Entity Name: OMEGA MOTORSPORTS, INC.

**FILED**  
**Jan 19, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2040 ST. JOHNS BLUFF RD. SOUTH  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

**Current Mailing Address:**

2040 ST. JOHNS BLUFF RD. SOUTH  
JACKSONVILLE, FL 32246

**New Mailing Address:**

FEI Number: 59-3549987

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

VAIRAMOGLOU, STILIANOS  
1212 BAYBREEZE DR.  
JACKSONVILLE, FL 32225 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: VAIRAMOGLOU, STILIANOS  
Address: 2040 ST. JOHNS BLUFF RD. S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VPT  
Name: VAIRAMOGLOU, LINDA  
Address: 1212 BAYBREEZE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

I hereby 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 all other like empowered.

SIGNATURE: LINDA VAIRAMOGLOU

VPT

01/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date