


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State


04-29-2005 90269 020 ***150.00

DOCUMENT # P99000041079	
1. Entity Name OMEGA BUSINESS VENTURES, INC.	

Principal Place of Business 7922 AZTEC CT. LAKE WORTH, FL 33463	Mailing Address 7922 AZTEC CT. LAKE WORTH, FL 33463
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2. Principal Place of Business 7956 LA ROSE CT.	3. Mailing Address SAME
Suite, Apt. #, etc. LAKE WORTH	Suite, Apt. #, etc. SAME
City & State FLORIDA USA	City & State SAME
Zip 33467	Country USA

14010261



04252005 Chg-P CR2E034 (10/03)

4. FEI Number 65-0920078	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RAGOONATH, MICHAEL 200 KNUTH RD STE 200 BOYNTON BEACH, FL 33436	
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7. Name and Address of New Registered Agent	
Street Address (P.O. Box Number is Not Acceptable)	
City FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PSD	<input type="checkbox"/> Delete	TITLE PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MAROTTA, ENRICO G		NAME MAROTTA, ENRICO G	
STREET ADDRESS 7922 AZTEC CT		STREET ADDRESS 7956 LA ROSE CT	
CITY-ST-ZIP LAKE WORTH, FL 33463		CITY-ST-ZIP LAKE WORTH, FL 33467	
TITLE VTD	<input type="checkbox"/> Delete	TITLE VTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MAROTTA, PAOLA		NAME MAROTTA, PAOLA	
STREET ADDRESS 7922 AZTEC CT.		STREET ADDRESS 7956 LA ROSE CT.	
CITY-ST-ZIP LAKE WORTH, FL 33463		CITY-ST-ZIP LAKE WORTH, FL 33467	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4/29/05** **561-641-6092**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #