

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000072466

Entity Name: THE OMNIA GROUP, INC.

FILED
Apr 06, 2006
Secretary of State

Current Principal Place of Business:

601 S. BOULEVARD
TAMPA, FL 336062929

New Principal Place of Business:

601 S. BOULEVARD
TAMPA, FL 336062629

Current Mailing Address:

601 S. BOULEVARD
TAMPA, FL 336062929

New Mailing Address:

601 S. BOULEVARD
TAMPA, FL 336062629

FEI Number: 59-3598297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASWELL, JOHN B
3435 BAYSHORE BLVD, STE 1500
TAMPA, FL 33629 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: DP () Delete
Name: CASWELL, JOHN B
Address: 3435 BAYSHORE BLVD #1500
City-St-Zip: TAMPA, FL 33629

Title: S () Delete
Name: CASWELL, HEATHER L
Address: 3435 BAYSHORE BLVD #1500
City-St-Zip: TAMPA, FL 33629

Title: T () Delete
Name: RORRER, STEVEN M
Address: 3821 SAN PEDRO STREET
City-St-Zip: TAMPA, FL 33629

Title: VP () Delete
Name: KWO, HAW JOE
Address: 6704 E 113TH AVENUE
City-St-Zip: TAMPA, FL 33617

Title: VP () Delete
Name: JULIE, STUDER A
Address: 5420 BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVEN M. RORRER/CONTROLLER

TRES

04/06/2006

Electronic Signature of Signing Officer or Director

Date