

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000092647

Entity Name: OMAR & SON, INC.

FILED  
Jan 05, 2007  
Secretary of State

**Current Principal Place of Business:**

P O BOX 1234  
OKEECHOBEE, FL 349731234

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1234  
OKEECHOBEE, FL 349731234

**New Mailing Address:**

FEI Number: 65-0963680      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ISMAIL, MAHA L  
1002 NORTHWEST PARK STREET  
OKEECHOBEE, FL 34972 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: PD ( ) Delete  
Name: ISMAIL, MAHA L  
Address: 1002 NORTHWEST PARK ST.  
City-St-Zip: OKEECHOBEE, FL 34972

Title: SD ( ) Delete  
Name: NAFAL, ZABEN  
Address: 1002 NORTHWEST PARK ST.  
City-St-Zip: OKEECHOBEE, FL 34972

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: NAFAL, ZABEN  
Address: 1002 NORTHWEST PARK ST.  
City-St-Zip: OKEECHOBEE, FL 34972

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: MAHA ISMAIL

PD

01/05/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date