## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT **1997** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S00398

(5)

OMNI REAL ESTATE GROUP, INC.

FILED
Jan 16 1997 8:00am
Secretary of State



9. Name and Address of Current Registered Agent  CAVANNA, ROBERT E 1443 WESTCHESTER AVE. WINTER PARK FL 32789  11. Pursuant to the provisions of Soctions 607.0502 and 607.1508. Florida Stativites, the above named corporation submits this statement for the purpose of changing its registered obtained agent or both, in the State of Florida Stativites, the above named corporation submits this statement for the purpose of changing its registered obtained with and accept the observation of, section 607.0505. Foreida Stativites, the above named corporation submits this statement for the purpose of changing its registere of the or registered agent or both, in the State of Florida Stativites, the above named corporation submits this statement for the purpose of changing its registere of the or registered agent and accept the observation of directors. I berety accept the appointment as registered agent are familiar with and accept the observation of change was authorized by the corporation's board of directors. I berety accept the appointment as registered agent are familiar with and accept the observation of the corporation of the purpose of changing its register of the origination of the purpose of change was authorized by the corporation's board of directors. I berety accept the appointment as registered agent are submits this statement for the purpose of changing its register of the corporation's board of directors. I benety accept the observation and accept the observation and accept the observation's board of directors. I benety accept the observation and accept th	200 W. WELBO SUITE 4 WINTER PARK US  2. Principal P 21  Suite, Apt 22  City & Stat 23  Zip	FL 32789  lace of Business  #, etc.  e  Country	2a. Mailing Address  2a. Mailing Address  2b. Suite, Apt. #, etc.  27 City & State  28 Zip.			3. Date Incorporated or Qualified 09/11/1990 4. FEI Number 59-3123597 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for	.05/0	\$8.75 Fee Ro \$5.00 Added	pplied For ot Applicable Additional equired May Be to Fees
CAVANNA, ROBERT E  144 WESTORESTER AVE. WINTER PARK FL 32789  80 City FL 85 Zip Code  15. Pursuant to the provisions of Sections 607.0502 and 607.1508. Fordide Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. It am furnifiar with and accept the obligation of Victoria Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  19. CAVANNA, ROBERT E  13. SIRECT ADDRESS  14.4 WESTORIESTER  13. SIRECT ADDRESS  14.4 WESTORIESTER  13. SIRECT ADDRESS  14.4 WESTORIESTER  13. SIRECT ADDRESS  14.4 THE DIRECTORS IN 12.  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  16. Change Addit Additional Control of Purpose Additional Control	24	9. Name and Address of Curre	29  ent Registered Agent	30					
SIGNATURE	1440 WIN	WESTCHESTER AVE. TER PARK FL 32789  to the provisions of Sections 607.05 registered agent or both, in the State	.02 and 607,1508, Florida te of Florida te	82 83 84 Statutes, the above was authorized by	Street Addi		FL		
Signature Injuries of promotions of the Laggines and the Laggines and professed Applies (Policy Profession P	agent. La	im familiar with and accept the obli	gations of, Section 607.050	05, Florida Statute	S.		P		
TILE	SIGITATORE				ent signature requi				
NAME   STREET ADDRESS   1443 WESTCHESTER   13 STREET ADDRESS   14 CITY: ST-ZIP	12.	OFFICERS AF				ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	AS IN 12
NAME	NAME STREET ADDRESS City+ST-ZIP	CAVANNA, ROBERT E 1443 WESTCHESTER		1.2 NAME 1.3 STREET 1.4 C/TY-S					Addition
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	NAME STREET ADDRESS		☐ DELET	E 6.1 TITLE 6.2 NAME 6.3 STREET	ADDRESS			☐ Change	Addition

14. Loo hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changes or on an attachment with an address.

SIGNATURE:

1/9/97 (407)647-225