

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000066649

**Entity Name:** OMEGA INSTALLATION LLC

**Current Principal Place of Business:**

927 SUNRIDGE POINT DRIVE  
P.H  
SEFFNER, FL 33584

**Current Mailing Address:**

927 SUNRIDGE POINT DRIVE  
P.H  
SEFFNER, FL 33584

**FEI Number:** 47-0986185

**Certificate of Status Desired:** No

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

TAVARES, ANTHONY R  
927 SUNRIDGE POINT DRIVE  
PH  
SEFFNER, FL 33584 US

*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:** ANTHONY R TAVARES

04/05/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MANAGER
Name	TAVARES, ANTHONY R	Name	TAVARES, ANTHONY R
Address	927 SUNRIDGE POINT DRIVE`	Address	927 SUNRIDGE POINT DRIVE P.H
City-State-Zip:	SEFFNER FL 33584	City-State-Zip:	SEFFNER FL 33584

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANTHONY R TAVARES

**PRES**

04/05/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date