

SCC eFile	2016 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	216507642
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1.) CORPORATION NAME: OMAR Enterprises, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: OIDA HAYNES 801 CAVALIER BLVD PORTSMOUTH, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: PORTSMOUTH CITY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 2/29/2016 SCC ID NO: 05343587 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>25,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	25,000
CLASS	AUTHORIZED				
COMMON	25,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: PO BOX 62069 CITY/ST/ZIP: VA BEACH, VA 23466

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MR AVIS R HAYNES TITLE: P/D ADDRESS: PO BOX 62069 CITY/ST/ZIP/CO: VA BEACH, VA 23466	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: OUIDA M HAYNES TITLE: OFFICER/VP ADDRESS: P O BOX 62069 CITY/ST/ZIP/CO: VIRGINIA BEACH, VA 23466	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ OUIDA M HAYNES	OUIDA M HAYNES, OFFICER/VP	2/29/2016
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.