

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000005027

**FILED**  
**Apr 29, 2019**  
**Secretary of State**  
**5790666398CC**

**Entity Name:** OMNI CART SERVICES, INC.

**Current Principal Place of Business:**

7370 PRODUCTION DR.  
MENTOR, OH 44060

**Current Mailing Address:**

PO BOX 366  
MENTOR, OH 44061

**FEI Number:** 34-1389631

**Certificate of Status Desired:** No

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

FATH, DENNIS  
237 LEEWARD DR.  
JUPITER, FL 33477 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PC  
Name            WOOLF, KEITH  
Address        20982 S. WOODLAND  
City-State-Zip: SHAKER HTS OH 44122

Title            VSVC  
Name            JACOBSON, WILLIAM  
Address        23699 STANFORD RD  
City-State-Zip: SHAKER HTS OH 44122

Title            D  
Name            LEVIN, JOEL  
Address        2467 STRATFORD RD  
City-State-Zip: CLEVELAND HTS OH 44118

*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 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 all other like empowered.*

**SIGNATURE:** KEITH WOOLF

**PRESIDENT**

**04/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date