

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2007 8:00 am
Secretary of State

03-01-2007 90006 019 ***150.00

DOCUMENT # 234524

1. Entity Name
TOM AND SUE, INC.



Principal Place of Business
**5320 STATE ROAD 84 (REESE ROAD)
DAVIE, FL 33314**

Mailing Address
**5320 STATE ROAD 84 (REESE ROAD)
DAVIE, FL 33314**

40026408



2. Principal Place of Business - No P.O. Box #
5629 PIERCE STREET

3. Mailing Address
5629 PIERCE STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02012007 Chg-P CR2E034 (12/06)

C/O SUSAN COYNE
City & State

City & State

4. FEI Number
59-0882499

Applied For
Not Applicable

HOLLYWOOD, FLORIDA

HOLLYWOOD, FLORIDA

Zip
33021

Country
USA

Zip
33021

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMAS L SCHOMMER
5320 STATE ROAD 84 (REESE ROAD)
DAVIE, FL 33314**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
SCHOMMER, G R
5861 S.W. 36 TERR.
FORT LAUDERDALE, FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
SCHOMMER, THOMAS L
1841 SW 36 AVENUE
FORT LAUDERDALE, FLA 33312** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
QUINTANA COYNE, SUSAN
5629 PIERCE ST.
HOLLYWOOD, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
SCHOMMER, THOMAS L
1841 SW 36 AVENUE
FORT LAUDERDALE, FLA 33312** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
SCHOMMER, T
5740 RODMAN STREET
HOLLYWOOD, FL 33023** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
SCHOMMER, THOMAS L
1841 SW 36 AVENUE
FORT LAUDERDALE, FLA 33312** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SUSAN QUINTANA COYNE
Susan Quintana Coyne

2/24/07

954-587-1011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #