2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2003
Secretary of State

DOCUMENT# 250938

Entity Name: THE TOBI COMPANY, INC.

Current Principal Place of Business:

10500 UNIVERSITY CENTER DR.
SUITE 143
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

10500 UNIVERSITY CENTER DR.
SUITE 143
TAMPA, FL 33612

New Mailing Address:

FEI Number: 59-1263852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BALLOTTA, PETER C
4207 CARROLLWOOD VILLAGE DR
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BALLOTTA, PETER C.,
Address: 4207 CARROLLWOOD VILLAGE DR
City-St-Zip: TAMPA, FL

Title: CVD ( ) Delete
Name: TOBI, FREDERICK G.,
Address: 4805 CULBREATH ISLES WAY
City-St-Zip: TAMPA, FL

Title: VD ( ) Delete
Name: TOBI, JOSEPH C.,
Address: 514 RIVIERA DR
City-St-Zip: TAMPA, FL

Title: DV ( ) Delete
Name: WILSON, PETER G.,
Address: 18232 CLEAR LAKE DRIVE
City-St-Zip: LUTZ, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: CVD (X) Change ( ) Addition
Name: TOBI, FREDERICK G.,
Address: 3007 W. ASBURY PLACE
City-St-Zip: TAMPA, FL

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PETER C. BALLOTTA PD 08/04/2003

Electronic Signature of Signing Officer or Director — Date