## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 360163**

Entity Name: TOM-MAR CORP

WHIPPLE, PATRICIA L,

HOLLYWOOD, FL 33021

1719 N. 44TH AVE

Name:

Address:

City-St-Zip:

FILED Jan 07, 2006 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
5759 PLUI HOLLYWC	NKETT ST DOD, FL 33023			
Current Mailing Address:			New Mailing Address:	
5759 PLUN HOLLYWO	NKETT ST DOD, FL 33023			
FEI Number:	: 59-1293632	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
1719 N 44 HOLLYWO	named entity so e of Florida.	US ubmits this statement for the pu	urpose of changing its registered	d office or registered agent, or both,
Electronic Signature of Registered Agent			nt	Date
Election Car	npaign Financing	Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ()  WHIPPLE, KENN 1719 N. 44TH AV HOLLYWOOD, F	/E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () WHIPPLE, TIMO 2236 TAYLOR S HOLLYWOOD, F	T #8	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title <sup>.</sup>	STD ()	Delete	Title <sup>.</sup>	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: KENNETH WHIPPLE PRES 01/07/2006