

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90057 021 ***150.00

DOCUMENT # H30256 1. Entity Name TOOLS-N-MORE, INC.					
Principal Place of Business 6537 SOUTHERN BLVD., SUITES 3-4 W. PALM BEACH FL 33413			Mailing Address 6537 SOUTHERN BLVD., SUITES 3-4 W. PALM BEACH FL 33413		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address 2155 Indian Road Suite, Apt. #, etc. West Palm Beach City & State FL Zip 33409			
Country 		Country USA		4. FEI Number 59-2474447	
Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent HANSEN, JUDENE - Judene 6537 SOUTHERN BLVD STE 4 WEST PALM BEACH FL 33413			7. Name and Address of New Registered Agent Name Judene Hansen Street Address (P.O. Box Number is Not Acceptable) 2155 Indian Road City West Palm Beach FL Zip Code 33409		
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  DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE DT <input type="checkbox"/> Delete NAME HANSEN, CHARLES F. JR. STREET ADDRESS 6694 S CALUMET CIRCLE CITY-ST-ZIP LAKE WORTH FL 33467-7008	TITLE PSD <input type="checkbox"/> Delete NAME HANSEN, JUDENE STREET ADDRESS 6694 S CALUMET CIRCLE CITY-ST-ZIP LAKE WORTH FL 33467		TITLE VP, S. D. <input type="checkbox"/> Delete NAME DRAGULA, MARK STREET ADDRESS 9050 WHIPPOWILL PASS CITY-ST-ZIP WEST PALM BEACH FL 33411	TITLE VP, S. D. <input type="checkbox"/> Delete NAME DRAGULA, MARK STREET ADDRESS 9050 WHIPPOWILL PASS CITY-ST-ZIP WEST PALM BEACH FL 33411	
TITLE VP, S. D. <input type="checkbox"/> Delete NAME DRAGULA, MARK STREET ADDRESS 9050 WHIPPOWILL PASS CITY-ST-ZIP WEST PALM BEACH FL 33411			TITLE VP, S. D. <input type="checkbox"/> Delete NAME DRAGULA, MARK STREET ADDRESS 9050 WHIPPOWILL PASS CITY-ST-ZIP WEST PALM BEACH FL 33411		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  Judene A Hansen Date 2/7/06 561-640-9575 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					