

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J11765

Entity Name: DETOMAS INC.

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

11 SOUTH SAFFORD AVENUE
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

1345 YALE DRIVE
HOLIDAY, FL 34691

New Mailing Address:

FEI Number: 59-2666786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VINSON, WILLIAM L.
110 S. LEVIS AVE.
TARPON SPRINGS, FL 34689

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: DP () Delete
Name: GUINAN PIESCO, DEBBI, E
Address: 1345 YALE DR
City-St-Zip: HOLIDAY, FL

Title: DS () Delete
Name: GUINAN, THOMAS,
Address: 1345 YALE DR
City-St-Zip: HOLIDAY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GUINAN PIESCO, DEBBI, E
Address: 1345 YALE DR
City-St-Zip: HOLIDAY, FL 34691 US

Title: DS (X) Change () Addition
Name: GUINAN, THOMAS,
Address: 1345 YALE DR
City-St-Zip: HOLIDAY, FL 34691

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: DEBBIE PIESCO GUINAN

DP

04/29/2004

Electronic Signature of Signing Officer or Director

Date