2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007
Secretary of State

DOCUMENT# P01000003266

Entity Name: TOMKAT ENTERPRISES, INCORPORATED

Current Principal Place of Business:

204 N ELM AVE.
SANFORD, FL 32795

New Principal Place of Business:

204 N ELM AVE.
SANFORD, FL 32771

Current Mailing Address:

POST OFFICE BOX 952946
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 58-2591014 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KILGER, TAMI F
1094 HENLEY DOWNS PLACE
HEATHROW, FL 32746 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: D ( ) Delete
Name: WHITE, THOMAS
Address: 63 CROSSWAY DRIVE
City-St-Zip: DEER PARK, NY 11729

Title: CFOD ( ) Delete
Name: WHITE, JANICE
Address: 63 CROSSWAY DRIVE
City-St-Zip: DEER PARK, NY 11729

Title: PD ( ) Delete
Name: KILGER, KYLE
Address: 1094 HENLEY DOWNS PLACE
City-St-Zip: HEATHROW, FL 32746

Title: VSD ( ) Delete
Name: KILGER, TAMI
Address: 1094 HENLEY DOWNS PLACE
City-St-Zip: HEATHROW, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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.

SIGNATURE: TAMI F. KILGER VSD 02/26/2007

Electronic Signature of Signing Officer or Director — Date