

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000012098

1. Entity Name
 TOMAR MANAGEMENT, INC.



Principal Place of Business
 5825 SW 131ST TERRACE
 MIAMI, FL 33156

Mailing Address
 5825 SW 131ST TERRACE
 MIAMI, FL 33156



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75 2988959 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOLFE, RICHARD G. ESQ.
 C/O PATHMAN LEWIS LLP
 TWO SOUTH BISCAYNE BLVD., SUITE 2400
 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-electing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
 Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	VITIELLO, MARCO N
STREET ADDRESS	5825 SW 131ST TERRACE
CITY-STATE-ZIP	MIAMI, FL 33156
TITLE	VSTD
NAME	PIEDRA, ANTONIO
STREET ADDRESS	10290 NW 9TH STREET CIRCLE, APT. 108
CITY-STATE-ZIP	MIAMI, FL 33172
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

00000196626
 01/27/05-80001-018 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/05 305-665-3411