

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056143

FILED
Sep 30, 2004
Secretary of State

Entity Name: TOMART SERVICES CORPORATION

Current Principal Place of Business:

2354 NW 87 DR
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

2354 NW 87 DR
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 43-2015278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
3929 N FEDERAL HWY
POMPANO BCH, FL 33064 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BCH, FL 33064 US

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: TAX HOUSE CORPORATION

09/30/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GEPP, OLIVER H
Address: 2354 NW 87 DR
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DV () Delete
Name: ZABALA, ANA MARIA
Address: 2354 NW 87 DR
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DS () Delete
Name: ZABALA, CECILIA GEPP
Address: 2354 NW 87 DR
City-St-Zip: CORAL SPRINGS, FL 33065

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:

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: OLIVER H. GEPP

DP

09/30/2004

Electronic Signature of Signing Officer or Director

Date