2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2007
Secretary of State

DOCUMENT# P05000005625

Entity Name: TOMAURA INC

Current Principal Place of Business:

1430 CRESTVIEW DRIVE
MT DORA, FL 32757

New Principal Place of Business:

922 CANCUN CT
THE VILLAGES, FL 32159

Current Mailing Address:

1430 CRESTVIEW DRIVE
MT DORA, FL 32757

New Mailing Address:

922 CANCUN CT
THE VILLAGES, FL 32159

FEI Number: 20-2133892 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEALY, MAURA E
1430 CRESTVIEW DRIVE
MT DORA, FL 32757 US

Name and Address of New Registered Agent:

HEALY, MAURA E
922 CANCUN CT
THE VILLAGES, FL 32159 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: 09/03/2007
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: D/O ( ) Delete
Name: HEALY, THOMAS J
Address: 1430 CRESTVIEW DRIVE
City-St-Zip: MT DORA, FL 32757

Title: D/O ( ) Delete
Name: HEALY, MAURA E
Address: 1430 CRESTVIEW DRIVE
City-St-Zip: MT DORA, FL 32757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/O (X) Change ( ) Addition
Name: HEALY, THOMAS J
Address: 922 CANCUN CT
City-St-Zip: THE VILLAGES, FL 32159

Title: D/O (X) Change ( ) Addition
Name: HEALY, MAURA E
Address: 922 CANCUN CT
City-St-Zip: THE VILLAGES, FL 32159

I hereby certify that the information supplied with this filing does not qualify 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: MAURA HEALY D/O 09/03/2007
Electronic Signature of Signing Officer or Director — Date