

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032400

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: TOMAS ARTIST'S INC.

**Current Principal Place of Business:**

2217 46TH STREET SW  
NAPLES, FL 34116 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 182  
ESTERO, FL 33928 US

**New Mailing Address:**

FEI Number: 20-2431957      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHAVEZ, TOMAS J  
2217 46TH STREET SW  
NAPLES, FL 34116 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: P ( ) Delete  
Name: CHAVEZ, TOMAS J  
Address: 2217 46TH ST. SW  
City-St-Zip: NAPLES, FL 34116 US

Title: VP ( ) Delete  
Name: FERNADO, TORRES  
Address: 8336 LAGOON RD.  
City-St-Zip: FORT MYERS BEACH, FL 33931 US

Title: S ( ) Delete  
Name: CHAVEZ, FELIZA  
Address: 2217 46TH STREET SW  
City-St-Zip: NAPLES, FL 34116 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: S (X) Change ( ) Addition  
Name: CHAVEZ, FELIZA  
Address: 2217 46TH STREET SW  
City-St-Zip: NAPLES, FL 34116 US

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: TOMAS J CHAVEZ

P

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date