2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034635

Entity Name: THE TOMI CO. OF CENTRAL FLORIDA INC.

FILED Apr 21, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

755 MORRISSEY DR #9210 520 QUAIL VIEW CT ORANGE CITY, FL 32763 US DEBARY, FL 32713 US

Current Mailing Address: New Mailing Address:

PO BOX 530785 DEBARY, FL 327530785 US

FEI Number: 20-2464539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

OWENS, TIM
755 MORRISSEY DR #9210
ORANGE CITY, FL 32763 US
OWENS, TIM
520 QUAIL VIEW CT
DEBARY, FL 32713 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: TIM OWENS 04/21/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,VP () Delete Title: P,VP (X) Change () Addition

 Name:
 OWENS, TIM
 Name:
 OWENS, TIM

 Address:
 755 MORRISSEY DR #9210
 Address:
 520 QUAIL VIEW CT

 City-St-Zip:
 ORANGE CITY, FL 32763 US
 City-St-Zip:
 DEBARY, FL 32713 US

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: TIM OWENS PRES 04/21/2007