FILE NOW: FILING FEE AFTER MAY 1 IS \$550

PROFIT DORPORATION INNUAL REPORT

1997



FLORIDA DEPARTMENT

Sandra B. Morth

STATE

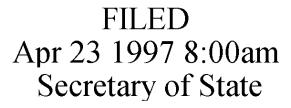
Secretary of Stat

DIVISION OF CORPORA

CUMENT # P94000012264 (5)

TOM DESIGNS BY D'ONI, INC.

I Place of Business Mailing Address BIO NORTH PUDGEWOOD DR. SEBRING FL 33870-7217 ITH RIDGEWOOD DR. FL 33870





ì		us /						
5304 Erie 1				Drive	3. Date Incorporated or Qualified 02/11/1994	3a. Date of 04/26/	of Last Report 5/1996	
cipal Place of Business 26		2a. Mailing Address		1	4. FEI Number			plied For
•		26			59-3234877		No	t Applicable
e, Apt. #, etc. Suite, Apt. #, etc.		FIA.		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
& State City & State				6. Election Campaign Financing		\$5.00	May Be	
		28 <i>3387</i> 2			Trust Fund Contribution		Added t	
	Country	Zip	Cour	ntry	8. This corporation has liability for in	ntangible tax	under s	. 199.032,
	25	29	30			Yes 🔲 N		
	ame and Address of Curren	it Registered Agent			10. Name and Address of New Reg	alstered Age	nt	
), DOROTHY L		į	81 Name				
5304 ERIE DRIVE			ŀ	82 Street Addre	ess (P.O. Box Number is Not Acceptable	le)		
SEBRING F	L 33872							
				83				
			}	84 City			- T	^- d-
				84 City		FL	15 Zip (Code
de or registere	ed agent, or both, in the State ar with, and accept the obliga	of Florida. Such change was	authorized	by the corporation	oration submits this statement for the pr on's board of directors. I hereby accep	t the appoint	ment as	registered
TURE	typed or printed have of registered age	at and title if and exists. (Alf	TE: Bonstond	Agent signature require	od uhop rejectation)	DATE		
SHEEK	OFFICERS AN		13.	Agent signature require	ADDITIONS/CHANGES TO OFFIC		DECTOR	S IN 12
T D	Oct Total Constitution	DELETE	1.1 717	IF T	ADDITIONS/OFFANGES TO OFFICE		Change	Addition
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	ERIE DRIVE			REET ADDRESS				
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			6.2 NA	ME				
D DR ESS			63 STF	REET ADDRESS				
21P			6.4 C/T	Y-ST-71P				

I do 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 and cated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

