FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000055425 (0)

TOM'S TEES, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

26

828 DODECANESE BLVD TARPON SPRINGS FL 34689

2. Principal Place of Business

828 DODECANESE BLVD TARPON SPRINGS FL 34689-3134

FILED Mar 18 1997 8:00am Secretary of State



3/6/97 (813)942-2996

38. Date of Last Report

Applied For

Not Applicable

03/19/1996

3. Date Incorporated or Qualified

07/25/1994

59-3255427

4. FEI Number

Suite Apt.	#. etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A		
City & State						6, Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
7ip 24	Country 25	Country Zip 30			***************************************	8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Curre	nt Registered Agent		81		10. Name and Address of New R	egistered .	Agent		
MITCHELL, THOMAS 828 DODECANESE BLVD					Name					
					Street Addre	ss (P.O. Box Number is Not Accepta	ble)			
TARPON SPRINGS FL 34689				82	2		,			
					63					
				84				T=T =		
					City		FL	85 Zip (
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the Stati m familiar with, and accept the obliq	e of Florida. Such change was	s authorized	d by	the corporation	eration submits this statement for the on's board of directors. I hereby accepts	purpose of opt the app	changing its ointment as	s registered registered	
SIGNATURE	Stguithing types or product harge of registered as	ert and to interplicable (NC	OTE: Registere	d Aper	nt signature required	d when reinstaling)	DATE			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI		DIRECTOR	IS IN 12	
TITLE	P	DELETE	11 Ti	TLF				☐ Change	Addition	
NAME	MITCHELL, THOMAS		12 N	AMF	1					
STREET ADDRESS	9036 CALLE ALTA				ADDRESS					
CITY ST-7IP	NEW PORT RICHEY FL			TY - ST	1					
THE		DELETE	2.1 Ti		1-24			Change	Addition	
NAME.		Land Other to	22 N/		}			ondingo	1 1.00.110.1	
STREET ADDRESS	İ				ADDRESS					
COV-ST-20		DELETE	2.4C		IT- ZIP			Change	Addition	
T1 [1 f								L) Change	L MUUIIIOII	
NAMI			32 N			•	•			
STREET ADDRESS					ADORESS					
CITY ST ZIP		DELETE		ITY-S	ST - ZIP			Change	Addition	
THE		בין אננות	4.131					Citalitie	L ROUNION	
NAVI:			4 2 N							
STREET ADDRESS			- 6		ADDRESS					
City-ST 2ii/		Drutt		TY - S1	T - ZIP			Chance	And Wes	
TITLE		☐ DELETE	5.1 TI		ļ			Change	Addition	
NAME (5.2 N/							
STREET ADDRESS			535	REET	ADDRESS					
CITY ST 7/2				ITY-S	T-ZIP					
Tift; E		DELETE	6.1 TI	TLE				Change	Addition	
NAME			6.2 NJ	AME						
STREET ADDRESS			6.3 \$1	TREET	ADDRESS					
City 51-74			6.4 CI	11Y-S1	T-ZIP					
14. I do heret	by certify that the information supplied	ed with this filing does not qua	alify for the	exe	mption stated	in Section 119.07(3)(i), Florida Statut	es. I furthe	r certify that	the	
informatio Lam an ol	in indicated on this armual report of freer or director of the corporation o	supplemental annual report is or the receiver or trustee empt	s true and a owered to a	accu execu	rate and that r ute this report	my signature shall have the same leg as required by Chapter 607, Florida	jai eπect as Statutes: a	ind that my r	aer oath; tha name	