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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000011847 (7)

TOM MEDICAL CORPORATION

Principal Place of Business				
	Principal.	Place	of Bu	sinoss

3816 DESOTO BLVD. PALM HARBOR FL 34683 Mailing Address

3816 DESOTO BLVD. PALM HARBOR FL 34683

FILED Feb 17 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

2/7/98

818-789-6344

						3. Date Incorporated or Qualified 02/10/1995				
2. Principal Place of Business			2a. Mailing Address		4. FEI Number		A	pplied For	1	
21 2209 TINNACLE CIRCLE S.			26 2209 TINNAGLE GROLE S.		59-3299717			lot Applicable		
Suite, Apt. #, etc			Suite, Apt #, etc.			5. Certificate of Status Desired				
City & State			City & State			Election Campaign Financing \$5.00 May Be				
ZID Country			28 PALM HARBOR, FL			Trust Fund Contribution				-
	:ф 3 4684	Country 25 USA	29 34684	Country		This corporation owes or has p Personal Property Tax due Jun			ntangible No	
24)		9, Name and Address of Current	1501	1301 001	`	10. Name and Address of New Registered Agent				1
	IFE	. DAVID M	<u></u>	81	Name					1
		6 DESOTO BLVD.		-	Chart Add	200 Poultimber in Not Assessed	hia			┧
		M HARBOR FL 34683		82	82 Street Address (P.O. Box Number is Not Acceptable) 83					
				83						
				<u> </u>	<u> </u>					1
				84	City		FL	. 85 Zip	Code	
11.	Pursuant t	to the provisions of Sections 607.0502	and 607 1508, Florida Statut	es, the abov	e-named corp	poration submits this statement for the	purpose of	changing	its registered	1
	agent. La	egistered agent, or both, in the State of m familiar with, and accept the obligati	r Florida. Such change was i ons of, Section 607.0505, Fli	authorized bi orida Statute	y the corpora s.	tion's board of directors. I hereby acce	ept the app	ointment as	s registered]
SIGI	NATURE									1
		Signature, typed or printed name of registered agenr			ent signature requi	red when reinstating)	DATE			10
12.		OFFICERS AND	DIRECTORS DELETE	13,	r	ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTO Change		CR2E034 (10/97
TITLE	- 1	PSTD		1.1 TITLE				Change	L Addition	15
NAME	ł	OSYPKA, THOMAS P 2209 PINNACLE CIRCLE SOUTI	ı.	1.2 NAME						18
	ET ADDRESS	PALM HARBOR FL	1	1.3 STREET						띬
TITLE	-ST-20P	PALM HARBON FL			ST-ZIP	· · · · · · · · · · · · · · · · · · ·		Change	Addition	Ѥ
NAME			[Jorten	2.1 TITLE 2.2 NAME	į			ondinge	- FROMINI	
	ET ADDRESS			2.3 STREET	ADODECC					
	-ST - ZIP	I		2. 4 CITY-		•	1 2			
TITLE			□ DELETE 3.1 TI		31-211			Change	Addition	1
NAME	: [_		3.2 NAME	1				_	1
STREE	ET ADDRESS				ADDRESS					
CITY-	-ST-ZIP				ST-ZIP					
TITLE		DELETE 4.1 To						Change	Addition	1
NAME	:	1		4. 2 NAME	Ì					1
STREE	ET ADORESS	438		4.3 STREET	r address					
CITY-	ST-7IP			4.4 CITY - S	ST-ZIP	<u> </u>				
TITLE	,		☐ DELETE	5.1 TITLE				☐ Change	Addition	
NAME	: (5.2 NAME	ĺ					ĺ
STREE	ET ADDRESS			5 3 STREET	F ADDRESS					
	ST-ZIP		5.4 CI		51 - ZIP			T16		1
TITLE			[_] DELETE	6.1 TITLE				Change	Addition	
NAME	I			6.2 NAME				•		
	ET ADDRESS			6.3 STREET	1					
_	SI-ZIP	ertily that the information supplied with	this filma doce not qualify t	6.4 CITY-S		Section 119 07/3Vi) Florida Statistas	I further or	artifu that th	e information	┨
	indicated	on this annual report or supplemental a	amoual report is true and acc	curate and th	at my signatu	ire shall have the same legal effect as	if made un	ider oath; th	hat I am an	
	Block 12	director of the corporation of the receiver Block 13 if changed or on an attach	rer or trustee empowered to ment with an address.	execute this	report as red	juired by Chapter 607, Florida Statutes	; and that i	ny name a	ppears in	

as Osyphe THOMAS OSYPKA, President