## 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 #

P96000066164 (0)

TOMARRIE, INC.

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**FILED** 

Apr 27 1998 8:00am

Secretary of State

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Principal Place	e of Business	Mailing Address	Mailing Address			-	ii obiik tiilo oilo		A 4101 1001
800 SEAGATE DRIVE		800 SEAGATE DRIVE	800 SEAGATE DRIVE						
8TE #203 NAPLES FL 34103		STE #203 Naples FL 34103				DO NOT WRITE IN THIS SPACE			
U\$	100	US				3. Date incorporated or Qualified			
						08/06/1996			
	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			ptied For
21 Suite Ant	# 242	26 Cuito Apt # ata	Suite, Apt. #, etc.			59-3393053			t Applicable
Suite, Apt.	R, DIC.	<u> </u>	27			5. Certificate of Status Desired	□ <b>&gt;</b>	Fee Re	Additional equired
City & State	)	City & State				6. Election Campaign Financing			May Be
23		28	28			Trust Fund Contribution		Added t	
Zip			Cou	ntry		8. This corporation owes or has pai		· —	
24			30		Personal Property Tax due June 30. Yes  10. Name and Address of New Registered Agent				] No
9, Name and Address of Current Registered Agent					Name	10. Name and Address of New He	Sisteled Wilei	11	
	NCHEAU, THOMAS SEAGATE DRIVE								
	203		82		Street Addre	ss (P.O. Box Number is Not Acceptab	16)		
	PLES FL 34105								
				84	City		8:	5 Zip (	~ode
				1	·		FL	1 '	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the digations of Section 607.0505, Florida Statutes.									
SIGNATURE Chance / Stanchiam THOMAS BRANCHEAU 3/17/98									
	<u> </u>	gent and title if applicable (NOT)	E: Registered	Ager	nt signature required		DATE	TOTOD	
12.	OFFIC RS AI	ND DIRECTORS  DELETE	13.	n F	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC		Change	S IN 12 Addition
NAME	BRANCHEAU, THOMAS	_ been	1.2 NAME				_	o.w.igo	710010011
STREET ADDRESS	2735 68YTH STREET SW		1,3 STREE		ADDRESS				
CITY-ST-ZIP	NAPLES FL		1.4 CI	TY - ST	1-21P				
TITLE	8	DELETE 2.1 T		ſLΕ				Change	Addition
NAME	<b>B</b> RANCHEAU, CARRIE		2.2 NA	2.2 NAME					
STREET ADDRESS	2735 68TH STREET SW			2.3 STREET ADORESS					
CITY-ST-ZIP	NAPLES FL				T-ZIP			Change	Addition
TITLE			3 1 TIT 3 2 NA		1		LJ'	ough <b>y</b> e	
STREET ADDRESS					ADDRESS .				
CITY-ST-ZIP	3		3.4. Ci		1				
TITLE		DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 N	AME					
STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 CI		- ZIP				
TITLE		☐ DELETE	5.1 TITLE				Ш	Change	Addition
NAME CORPET ADDOCCE			5.2 NA		* DODECC				
STREET ADDRESS					ADDRESS 77D				
CITY-ST-ZIP		DELETE	5.4 CIT 6.1 TIT		- 211		[]	Change	Addition
NAME	•		6.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP						
14. I hereby o	ertify that the information supplied	with this filing does not qualify for	or the exe	moti	ion stated in S	ection 119,07(3)(i), Florida Statutes, I f	further certify	that the	information

Interesty certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Further certify that it am an indicated on this annual report or supplemental annual report is frue 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.

GNATURE:

420.43