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Mar 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000094674 (4)

1. Corporation Name
TOMASSO & COP, INC.

Principal Place of Business
2263 W. NEW HAVEN AVENUE
SUITE 379
WEST MELBOURNE FL 32904

Mailing Address
2263 W. NEW HAVEN AVENUE
SUITE 379
WEST MELBOURNE FL 32904-3805

3. Date Incorporated or Qualified 11/15/1996	3a. Date of Last Report N/A
4. FEI Number 59-3406707	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent
TOMASSO, VICTOR PAUL
2263 W. NEW HAVEN AVENUE
SUITE 379
WEST MELBOURNE FL 32904

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reappointing) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	☐ DELETE	11 TITLE	☐ Change ☒ Addition
TOMASSO, VICTOR PAUL		12 NAME	P/T/D
458 N. WICKHAM ROAD, #175		13 STREET ADDRESS	
MELBOURNE FL 32935		14 CITY-ST-ZIP	
NAME	☐ DELETE	21 TITLE	☐ Change ☒ Addition
COP, RICHARD J		22 NAME	V/S/D
458 N. WICKHAM ROAD, #175		23 STREET ADDRESS	
MELBOURNE FL 32935		24 CITY-ST-ZIP	
NAME	☐ DELETE	31 TITLE	☐ Change ☐ Addition
		32 NAME	
		33 STREET ADDRESS	
		34 CITY-ST-ZIP	
NAME	☐ DELETE	41 TITLE	☐ Change ☐ Addition
		42 NAME	
		43 STREET ADDRESS	
		44 CITY-ST-ZIP	
NAME	☐ DELETE	51 TITLE	☐ Change ☐ Addition
		52 NAME	
		53 STREET ADDRESS	
		54 CITY-ST-ZIP	
NAME	☐ DELETE	61 TITLE	☐ Change ☐ Addition
		62 NAME	
		63 STREET ADDRESS	
		64 CITY-ST-ZIP	

14. 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 indicated 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.

SIGNATURE: Victor Paul Tomasso VICTOR PAUL TOMASSO 3/23/97 (40) 253-5720

CR2E034 (9/96)