

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S68597

1. Entity Name
TMI HOLDINGS, INC.

Principal Place of Business
3141 WEST HALLANDALE BEACH BLVD.
HALLANDALE FL 33009

Mailing Address
3141 WEST HALLANDALE BEACH BLVD.
HALLANDALE FL 33009

02 AUG 21 PM 3:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98025



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0309540		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
Zip		Zip		65-0309540			
Country		Country		65-0309540			

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LITTLE ILEEN 3141 W HALLANDALE BCH BLVD HALLANDALE FL 33009		Name Street Address (P.O. Box Number is Not Acceptable) City	
		FL Zip Code	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP LITTLE, ILEEN 3141 W. HALLANDALE BEACH BLVD. HALLANDALE FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DOUGLAS, MARC 3141 W. HALLANDALE BEACH BLVD. HALLANDALE FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCFO WILEY, STEPHEN L 3141 W HALLANDALE BEACH BLVD HALLANDALE FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other information empowered.

CR2E034 (4/02)