6/12

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 12, 2001 8:00 am
Secretary of State
06-12-2001 90002 004 ***408.75
07-12-2001 90003 021 ***141.25

DOCUMENT # V47331

1. Entity Name
TOMASA ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2400 NW 81 AVE SUNRISE FL 33322 US	1802-102 N UNIVERISTY DR #347 PLANTATION FL 33322 US

A0076731

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	2400 NW 81 Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Sunrise, FL
Zip / Country	Zip: 33322 / Country: Broward

4. FEI Number 65-0348021 ☐ Applied ☐ Not Appl

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KOHN, KATHY 2400 NW 81ST AVE SUNRISE FL 33322	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.

SIGNATURE: Kathy Kohn Pres. DATE: 6-7-20
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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 $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Added to Fee

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT KOHN, KATHY 2400 NW 81 AVE SUNRISE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Ac
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS HOLDEN, JACKIE 2400 NW 81 AVE SUNRISE FL 33322	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Holden, Jackie 2400 N.W 81 Ave Sunrise, FL 33322	☒ Change ☐ A
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Christopher Kohn 2400 NW 81 Ave Sunrise, FL 33322	☐ Change ☑ Ad
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Ad

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 informatio 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 direct 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 1 changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Kathy Kohn President 6-7-2001 (954) 746-211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #