

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# V58475

**FILED**  
**Feb 10, 2006**  
**Secretary of State**

**Entity Name:** TOM'S FLOOR SANDING, INC.

**Current Principal Place of Business:**

18202 CYPRESS COVE RD  
LUTZ, FL 33549 US

**New Principal Place of Business:**

**Current Mailing Address:**

18202 CYPRESS COVE RD  
LUTZ, FL 33549 US

**New Mailing Address:**

**FEI Number:** 65-0354127

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAUERWEIN, THOMAS R  
18202 CYPRESS COVE RD  
LUTZ, FL 32549 US

**Name and Address of New Registered Agent:**

SAUERWEIN, THOMAS R  
18202 CYPRESS COVE RD  
LUTZ, FL 32549 US

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: THOMAS SAUERWEIN

02/10/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SAUERWEIN, THOMAS R,  
Address: 18202 CYPRESS COVE RD  
City-St-Zip: LUTZ, FL 33549

Title: ST ( ) Delete  
Name: SAUERWEIN, PEGGY S.  
Address: 18202 CYPRESS COVE RD  
City-St-Zip: LUTZ, FL 33549

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPM ( ) Change (X) Addition  
Name: SAUERWEIN, THOMAS R II  
Address: 18202 CYPRESS COVE RD  
City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PEGGY SAUERWEIN

ST

02/10/2006

Electronic Signature of Signing Officer or Director

Date