

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G18673

**FILED**  
**Feb 10, 2020**  
**Secretary of State**  
**5861444835CC**

**Entity Name:** 7 T'S ENTERPRISES, INC.

**Current Principal Place of Business:**

9905 CLINT MOORE ROAD  
BOCA RATON, FL 33496-1016

**Current Mailing Address:**

9905 CLINT MOORE ROAD  
BOCA RATON, FL 33496-1016 US

**FEI Number:** 59-2245115

**Certificate of Status Desired:** No

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

ADLER WELLIKOFF, PLLC  
1300 N FEDERAL HWY STE 107  
BOCA RATON, FL 33432 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name THOMAS, STEPHEN  
Address 9905 CLINT MOORE RD  
City-State-Zip: BOCA RATON FL

Title SD  
Name LASALLE, KATHY  
Address 9905 CLINT MOORE ROAD  
City-State-Zip: BOCA RATON FL

Title TD  
Name THOMAS, CINDY  
Address 9905 CLINT MOORE ROAD  
City-State-Zip: BOCA RATON FL

Title VD  
Name ANDERSHOCK, JANE.  
Address 9905 CLINT MOORE ROAD  
City-State-Zip: BOCA RATON FL

Title DV  
Name THOMAS, NORMAN  
Address 9905 CLINT MOORE RD  
City-State-Zip: BOCA RATON FL

Title DV  
Name THOMAS, JOHN JR  
Address 9905 CLINT MOORE RD  
City-State-Zip: BOCA RATON FL

*I hereby 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 all other like empowered.*

**SIGNATURE:** STEPHEN THOMAS

P

02/10/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date