

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Nov 13, 2009  
Secretary of State**

DOCUMENT# P00000065479

Entity Name: TABASHE ENTERPRISES, INC.

**Current Principal Place of Business:**

3370 HIDDEN BAY DRIVE #2008  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

3370 HIDDEN BAY DRIVE #2008  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 65-1022537      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DAGAN, SHELDON D  
4601 SHERIDAN STREET  
SUITE 401  
HOLLYWOOD, FL 33021 US

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

DAGAN, SIGAL  
2430 NE 201 STREET  
MIAMI, FL 33180 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: SIGAL DAGAN      11/13/2009  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: AZERBAT, EMILY  
Address: 3370 HIDDEN BAY DRIVE #2008  
City-St-Zip: AVENTURA, FL 33180

Title: D      ( ) Delete  
Name: AZERBAT, MOSHE  
Address: 3370 HIDDEN BAY DRIVE #2008  
City-St-Zip: AVENTURA, FL 33180

Title: D      ( ) Delete  
Name: AZERBAT, VIOLETTE  
Address: 3370 HIDDEN BAY DRIVE #2008  
City-St-Zip: AVENTURA, FL 33180

Title: D      ( ) Delete  
Name: AZERBAT, DAVID  
Address: 3370 HIDDEN BAY DRIVE #2008  
City-St-Zip: AVENTURA, FL 33180

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: SIGAL DAGAN      AGEN      11/13/2009  
Electronic Signature of Signing Officer or Director      Date