

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K88922

Entity Name: TAM & SAM, INC.

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

3300 PGA BLVD  
S640  
PALM BCH GARDENS, FL 33410

## New Principal Place of Business:

## Current Mailing Address:

3300 PGA BLVD  
S640  
PALM BCH GARDENS, FL 33410

## New Mailing Address:

3300 PGA BLVD.  
SUITE 640  
PALM BEACH GARDENS,, FL 33410 U.

FEI Number: 65-0138581

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ACHILLE, TAMARA M.  
3300 PGA BLVD  
S640  
PALM BCH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

LODDI, PASQUALINO  
3300PGA BLVD.  
S640  
PALM BCH GARDENS, FL 33410 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: PASQUALINO LODDI

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: ACHILLE, TAMARA M  
Address: 6435 ROCK CREEK DR.  
City-St-Zip: LAKE WORTH, FL 33467 U.

Title: D (X) Delete  
Name: ACHILLE, TAMARA M  
Address: 6435 ROCKCREEK DR.  
City-St-Zip: LAKE WORTH, FL 33467 U.

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: LODDI, PASQUALINO  
Address: 3300 PGA BLVD.  
City-St-Zip: PALM BEACH GARDENS, FL 33410 U.

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: PASQUALINO LODDI

PST

01/08/2008

Electronic Signature of Signing Officer or Director

Date