


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2004 8:00 am**  
**Secretary of State**

04-16-2004 90091 037 \*\*\*150.00

<b>DOCUMENT # L32830</b> 1. Entity Name <b>TAMARIND INVESTMENTS, INC.</b>																											
Principal Place of Business <b>1180 CELEBRATION BV STE 105 CELEBRATION, FL 34747</b>		Mailing Address <b>1180 CELEBRATION BV STE 105 CELEBRATION, FL 34747</b>																									
2. Principal Place of Business <b>950 CELEBRATION BLVD</b> Suite, Apt. #, etc. <b>SUITE A</b> City & State <b>CELEBRATION, FL</b>		3. Mailing Address <b>950 CELEBRATION BLVD.</b> Suite, Apt. #, etc. <b>SUITE A</b> City & State <b>CELEBRATION, FL</b>																									
Zip <b>34747</b>		Country <b>USA</b>																									
4. FEI Number <b>65-0168377</b>		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required																									
6. Name and Address of Current Registered Agent  <b>DYMOND, WILLIAM T ESQ 215 NORTH EOLA DRIVE ORLANDO, FL 32801</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>																									
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																											
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:40%;">P DAHRUJ, JOSEPH JR</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>1180 CELEBRATION BV STE 105</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>CELEBRATION, FL 34747</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	P DAHRUJ, JOSEPH JR	<input type="checkbox"/> Delete	NAME	1180 CELEBRATION BV STE 105		STREET ADDRESS	CELEBRATION, FL 34747		CITY-ST-ZIP			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:40%;">P DAHRUJ, JOSEPH JR</td> <td style="width:10%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>7503 ATLANTIS WAY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>KISSIMMEE, FL 34747</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	P DAHRUJ, JOSEPH JR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	7503 ATLANTIS WAY		STREET ADDRESS	KISSIMMEE, FL 34747		CITY-ST-ZIP		
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12. 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 information 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.  <b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																											
Date <b>3/15/04</b>		Daytime Phone # <b>407-997-7200</b>																									