

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064204

Entity Name: T.A.M.E., INC.

FILED  
Apr 26, 2008  
Secretary of State

## Current Principal Place of Business:

16671 ROYAL POINCIANA DRIVE  
WESTON, FL 33326

## New Principal Place of Business:

1112 WESTON ROAD  
141  
WESTON, FL 33326

## Current Mailing Address:

16671 ROYAL POINCIANA DRIVE  
WESTON, FL 33326

## New Mailing Address:

1112 WESTON ROAD  
141  
WESTON, FL 33326

FEI Number: 65-1117023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOFFETT, IAN  
16671 ROYAL POINCIANA DRIVE  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

MOFFETT, IAN A DIRECT,  
16671 ROYAL POINCIANA DRIVE  
WESTON, FL 33326 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: IAN MOFFETT

04/26/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MOFFETT, IAN  
Address: 16671 ROYAL POINCIANA DRIVE  
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete  
Name: TAGLE, WILLIAM  
Address: 8195 SW 69TH TERR.  
City-St-Zip: MIAMI, FL 33143

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MOFFETT, IAN A DIRECT.  
Address: 16671 ROYAL POINCIANA DRIVE  
City-St-Zip: WESTON, FL 33326

Title: D (X) Change ( ) Addition  
Name: TAGLE, WILLIAM D DIRECT.  
Address: 8195 SW 69TH TERR.  
City-St-Zip: MIAMI, FL 33143

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: IAN MOFFETT

DIRE

04/26/2008

Electronic Signature of Signing Officer or Director

Date