FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

03 DEC 26 AM 8:39

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P-02000019525

1. Entity Name TAM SMALL INVESTMENT & DEVELOPMENT INC.

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2525 SUPERIOR ST	2525 SUPERIOR ST
Suite, Apt. #, etc. UNIT 1	Suite, Apt. #, etc. UNIT 1
City & State OPA LOCKA FL	City & State OPA LOCKA FLORIDA
Zip 33054 Country USA	Zip 33054 Country USA

4. FEI Number 02-0550240 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name TAM T. O'MAYA

Street Address (P.O. Box Number is Not Acceptable) 2525 SUPERIOR ST

UNIT ONE

City OPA LOCKA FL Zip Code 33054

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 _____ 12/22/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE	PRESIDENT / DIRECTOR
NAME	TAM TEDMAN O'MAYA II
STREET ADDRESS	2525 SUPERIOR ST
CITY-ST-ZIP	OPA LOCKA FL 33054
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE	200025779792
NAME	12/26/03--01086--023 **150.00
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	**DO NOT WRITE**
NAME	**IN THIS SPACE**
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CITY-ST-ZIP	

CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 12/22/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

TAM SMALL INVESTMENT
& DEVELOPMENT INC
2525 SUPERIOR ST
OPA LOCICA FL
33054.

TO WHOM IT MAY CONCERN

I like to inform you that
I did not receive my annual
Business report at the beginning
of this year.

Therefore had not been able
to file promptly.

I here include a regular fee
of $150 one hundred dollars

Sincerely

TAM OMAYA
FOR TAM SMALL INVESTMENT & DEVELOP-
MENT INC