

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90008 021 ***150.00

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1. Entity Name
TAM/CYPRESSWOOD SERVICES, INC.



Principal Place of Business
2201 NW 30TH PLACE
A
POMPANO BEACH, FL 33069

Mailing Address
2201 NW 30TH PLACE
A
POMPANO BEACH, FL 33069

44009880



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

01232004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
02-0573115

Applied For
Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DR., SUITE 500 EAST
WEST PALM BEACH, FL 33401

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	DV	<input type="checkbox"/> Delete
NAME	ALNAJJAR, NADER	
STREET ADDRESS	2201 NW 30TH PLACE	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	
TITLE	DP	<input type="checkbox"/> Delete
NAME	CHALEFF, LAWRENCE N	
STREET ADDRESS	2201 NW 30TH PLACE	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	
TITLE	DVTA	<input type="checkbox"/> Delete
NAME	CLARK, SUSAN	
STREET ADDRESS	2201 NW 30TH PLACE	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	
TITLE	DVS	<input type="checkbox"/> Delete
NAME	SHANANI, MEENAZ	
STREET ADDRESS	2201 NW 30TH PLACE	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	
TITLE	DV	<input type="checkbox"/> Delete
NAME	LAL, SANJAY	
STREET ADDRESS	2201 NW 30TH PLACE	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	
TITLE	DV	<input type="checkbox"/> Delete
NAME	SHETTY, DAYANAND	
STREET ADDRESS	2201 NW 30TH PLACE	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dhanani, Meenaz
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

SIGNATURE: Meenaz Dhanani
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/04 407-239-9142
Date Daytime Phone #

Meenaz Dhanani - VP & Secretary