

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000030633

FILED
Apr 29, 2009
Secretary of State

Entity Name: TAM/CYPRESSWOOD SERVICES, INC.

Current Principal Place of Business:

2201 NW 30TH PLACE
SUITE A
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

2201 NW 30TH PLACE
SUITE A
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 02-0573115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GY CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DR.
STE 500 EAST
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: ALNAJJAR, NADER
Address: 2201 NW 30TH PLACE, STE A
City-St-Zip: POMPANO BEACH, FL 33069

Title: DP () Delete
Name: CHALEFF, LAWRENCE N
Address: 2201 NW 30TH PLACE, STE A
City-St-Zip: POMPANO BEACH, FL 33069

Title: DVT () Delete
Name: LAL, SANJAY
Address: 2201 NW 30TH PLACE, STE A
City-St-Zip: POMPANO BEACH, FL 33069

Title: DVS () Delete
Name: DHANANI, MEENAZ
Address: 2201 NW 30TH PLACE, STE A
City-St-Zip: POMPANO BEACH, FL 33069

Title: DV () Delete
Name: SHETTY, DAYANAND
Address: 2201 NW 30TH PLACE, STE A
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MEENAZ DHANANI

DVS

04/29/2009

Electronic Signature of Signing Officer or Director

Date