

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000122289

Entity Name: TABB GROUP, INC.

FILED
Jul 29, 2008
Secretary of State

Current Principal Place of Business:

15715 S. DIXIE HWY # 312
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

15715 S. DIXIE HWY # 312
MIAMI, FL 33157

New Mailing Address:

FEI Number: 61-1431797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAVID, BENJAMIN
15715 S. DIXIE HWY # 312
MIAMI, FL 33157 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JAVID, BENJAMIN
Address: 15715 S. DIXIE HWY # 312
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: XIOMARA, HERNANDEZ
Address: 15715 S. DIXIE HWY #312
City-St-Zip: MIAMI, FL 33157

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DIR () Change (X) Addition
Name: KHASHLAK, DARYOUSH
Address: 15715 S. DIXIE HWY #312
City-St-Zip: MIAMI, FL 33157

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: BENJAMIN JAVID

P

07/29/2008

Electronic Signature of Signing Officer or Director

Date