

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000155357

Entity Name: TSAAMT, INC.

**FILED**  
**Aug 31, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5292 SOUTEL DR  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

5292 SOUTEL DR  
JACKSONVILLE, FL 32208

**New Mailing Address:**

FEI Number: 76-0808564

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SEIFE, TEFERA  
5292 SOUTEL DR  
JACKSONVILLE, FL 32208 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-S  
Name: SEIFE, TEFERA  
Address: 1419 GUARDIAN DR  
City-St-Zip: JACKSONVILLE, FL 32221

Title: DIR  
Name: ASEFA, ALMAZ  
Address: 1419 GUARDIAN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

I hereby 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 all other like empowered.

SIGNATURE: TEFERA SEIFE

PRES

08/31/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date