2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000082394

FILED Mar 24, 2009 Secretary of State

Entity Nai	me: TARA S	DLOMON ENTERPRISES, INC	S.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ONIAL DR., S E, FL 33063	TE. 303			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	ONIAL DR., S E, FL 33063	TE. 303			
FEI Number:	: 26-3373987	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
HIRSCH, DAVID CPA 175 W. CAMINO REAL BOCA RATON, FL 33432 US			5401 N UNIVERSITY 204	DUBROW, ALAN CPA 5401 N UNIVERSITY DR 204 CORAL SPRINGS, FL 33067 US	
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: ALAN DUBROW				03/24/2009	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SOLOMON, TA	AL DR., STE. 303	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SOLOMON, SA	ERT TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: TARA SOLOMON 03/24/2009 Μ