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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P95000085618
 1. Corporation Name
 TAMAMI MANAGEMENT GROUP, INC.



Principal Place of Business: 13390 S.W. 131ST ST. MIAMI FL 33186 US
 Mailing Address: 13390 SW 131ST ST. MIAMI FL 33186 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/07/1995

4. FEI Number: 65-0623845 Applied For: Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

21. Principal Place of Business: 13390 SW 131 ST
 22. Suite, Apt. #, etc.: #134
 23. City & State: Miami, FL
 24. Zip: 33186 25. Country: Dade
 26. Mailing Address: 13390 SW 131 ST
 27. Suite, Apt. #, etc.: #134
 28. City & State: Miami, FL
 29. Zip: 33186 30. Country: Dade

9. Name and Address of Current Registered Agent
 PEREZ, FELIX A
 13390 S.W. 131ST ST.
 #136
 MIAMI FL 33186

10. Name and Address of Now Registered Agent
 81 Name: Felix A. Perez
 82 Street Address (P.O. Box Number is Not Acceptable): 13390 SW 131 ST #134
 83 City: Miami FL
 84 City: Miami FL 85 Zip Code: 33186

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Felix A. Perez DATE: 02/28/99

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	PEREZ, FELIX A	
STREET ADDRESS	13390 S.W. 131ST ST. #136	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MUSLERA, ALMEDORINO	
STREET ADDRESS	13390 S.W. 131ST ST. #136	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Felix A. Perez	
1.3 STREET ADDRESS	13390 SW 131 ST #134	
1.4 CITY-ST-ZIP	Miami FL 33186	
2.1 TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	ALMEDORINO MUSLERA	
2.3 STREET ADDRESS	13390 SW 131 ST #134	
2.4 CITY-ST-ZIP	Miami FL 33186	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (1/1/98)