

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000048969

1. Entity Name  
TANMAR INVESTMENTS, INC.

Principal Place of Business

501 CAUSEWAY BLVD  
BELLEAIR BEACH FL 33786

Mailing Address

501 CAUSEWAY BLVD  
BELLEAIR BEACH FL 33786

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3503043

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

AVIRAM, TAL  
501 CAUSEWAY BLVD  
BELLEAIR BEACH FL 33786

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete  
NAME AVIRAM, JIMMY  
STREET ADDRESS 501 CAUSEWAY BLVD  
CITY-ST-ZIP BELLEAIR BEACH FL 33786

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME AVIRAM, HAIA  
STREET ADDRESS 501 CAUSEWAY BLVD  
CITY-ST-ZIP BELLEAIR BEACH FL 33786

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE CFO ☐ Delete  
NAME AVIRAM, MEIRAV  
STREET ADDRESS 501 CAUSEWAY BLVD  
CITY-ST-ZIP BELLEAIR BEACH FL 33786

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME AVIRAM, RAVIT  
STREET ADDRESS 501 CAUSEWAY BLVD  
CITY-ST-ZIP BELLEAIR BEACH FL 33786

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME AVIRAM, TAL  
STREET ADDRESS 501 CAUSEWAY BLVD  
CITY-ST-ZIP BELLEAIR BEACH FL 33786

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Feb 25, 2002 8:00 am  
Secretary of State

02-25-2002 90024 014 \*\*\*150.00

B0034037



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)