## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000107123

1. Entity Name

TAM MANAGEMENT SERVICES, INC.



FILED

03 DEC -2 PM 12: 49

SECRETARY OF STATE TALLAPASS E. FLORIDA

DO NOT WRITE IN THIS SPACE 300025232533 12/04/03--01027--027 \*\*1380.0

2. Principal Place	of Business	3. Mailing Address				
2201 NW 3	Oth Place	2201 NW 30	th Place			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE	
Suite A		Suite A				
City & State		City & State		4. FEI Number	Applied For	
Pompano Beach, FL		Pompano Be	ach, FL	59-3483638	Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional	
33069	USA	33069	USA		Fee Required	
	( '''' )	[ -'	1 ' '			

## DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent							
Name Valdes-Fauli Corpora	te Services, Inc.						
Street Address (P.O. Box Number is Not Acceptable)							
777 South Flagler Drive,	Suite 500 East						
City West Palm Beach	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed of printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
*	nuary 1 - May 1 Fee Is \$150.00 After May 1, Fee Is \$550.00 Amended UBR is \$61.25 Payable to Florida Department of State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V Alnajjar, Nader 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P Chaleff, Lawrence N. 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V, T, AS Clark, Susan I. 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ȘT-ZIP	D, V, S Dhanani, Meenaz 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS GITY-ST-ZIP	IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V Lal, Sanjay 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V Shetty, Dayanand 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP				

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

Signature and typed or printed name of signing officer or director

Meenaz Dhanani, VP/Sec.

11/21/03

(407) 239-9142

CR2E034B (12/02)

Daytime Phone #