2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P99000040000

Mailing Address

1. Entity Name

TAMA CORPORATION

Principal Place of Business

changed, or on an attachment with

SIGNATURE:



FILED Jan 29, 2003 8:00 am Secretary of State

01-29-2003 90289 041 ***150.00

7220 N. W. 36 625	STH ST	7220 N. W. 36TH ST 625							
MIAMI FL 33166		MIAMI FL 33166			<u> </u>	206 4 6 002 6 4 002 8 0 6 0 6 6 8 0			
2 Principal F	Place of Business	2 Mailing Address							
137	Place of Business 89th Court	3. Mailing Address 1375 N.W. (39th (ωrt!	, , , , , , , , , , , , , , , , , , , ,				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & Stat	n FL	City & State			4. FEI Number 65-1003049		Applie		
Mian	Country	Miami, 7	Country				Not Ap	oplicable	
3317	72 USA	33172	USA		5. Certificate of Status Desired	Fee Re	equired		
	6. Name and Address of Current F	Registered Agent	Name	<u></u> n	7. Name and Address of New F	Registered Agent			
PENINSUL	A REGISTERED AGENTS, INC		<u>LW</u>	<u>ARDO BRA</u>	NGEK				
	SCAYNE BLVD., #4874		Street A	ddress (P.	O. Box Number is Not Acceptable	a)		<u> </u>	
MIAMI FL	•		1/2	20	QUAYSIDE	TERR	#4	ma	
			City			Zir	Code 33/3	0 1	
O The charge	named entity submits this statement for					FL T	<u> 33/3</u>	8	
	inamed entity submits this statement for tions of register of agent.	the purpose of changing its re	egisterea onice or	regisiere	d agent, or both, in the State of Fi	onda. Tam familiar	with, and	ассері	
CLOSULTURE	Millound	FDUARDO	BRAW	6FR	PRESIDENT	1/27/6	23		
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: F	Registered Agent signati	ure required w	when reinstating)	DATE			
F.	LE NOW!!! FEE IS \$150.00								
	May 1, 2003 Fee will be \$550.00	. 🖠			Election Campaign Fit Trust Fund Contribution		\$5.00 N Added to I		
Make Check	Payable to Florida Department of	State			Trade Faria Continuation	"·· ,	.,		
10.	OFFICERS AND I		11.	6.7	ADDITIONS/CHANGES TO OFF				•
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TITLE	DP	☐ Delete	TITLE	11) (E	. 🕜	Γ ΆΣ Ch	ange [] Addition	ġ
NAME	Branger, Henrique i		NAME	BRAI	JEER, HENRIQUE	<u>. I</u>		ľ	٠
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CITY-ST-ZIP	SAN CRISTOBAL, VENEZUELA		CITY-ST-ZIP	00.75					
TITLE		Delete	TITLE	PST EDVA	RDO BRANGER	☐ Ch	-	₹ Addition	
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CITY-ST-ZIP		——————————————————————————————————————	CITY-ST-ZIP					7. 5. 1. 11. 1	
title Name		☐ Delete	TITLE NAME			□ Ch	ange	Addition	
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CITY-ST-ZIP			CITY-ST-ZIP					- 1	

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 Block 11 if