

AMENDED  
**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000050332

1. Entity Name

TAM I RESIDENTIAL HOLDINGS, INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

2201 NW 30th Place

Suite, Apt. #, etc.

Suite A

City & State

Pompano Beach, FL

Zip

33069

Country

USA

3. Mailing Address

2201 NW 30th Place

Suite, Apt. #, etc.

Suite A

City & State

Pompano Beach, FL

Zip

33069

Country

USA

4. FEI Number

59-3580020

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Valdes-Fauli Corporate 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

33401

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 or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

|                |                             |                |  |
|----------------|-----------------------------|----------------|--|
| TITLE          | D, V                        | TITLE          |  |
| NAME           | Alnajjar, Nader             | NAME           |  |
| STREET ADDRESS | 2201 NW 30th Place, Suite A | STREET ADDRESS |  |
| CITY-ST-ZIP    | Pompano Beach, FL 33069     | CITY-ST-ZIP    |  |
| TITLE          | D, P                        | TITLE          |  |
| NAME           | Chaleff, Lawrence N.        | NAME           |  |
| STREET ADDRESS | 2201 NW 30th Place, Suite A | STREET ADDRESS |  |
| CITY-ST-ZIP    | Pompano Beach, FL 33069     | CITY-ST-ZIP    |  |
| TITLE          | D, V, T, AS                 | TITLE          |  |
| NAME           | Clark, Susan I.             | NAME           |  |
| STREET ADDRESS | 2201 NW 30th Place, Suite A | STREET ADDRESS |  |
| CITY-ST-ZIP    | Pompano Beach, FL 33069     | CITY-ST-ZIP    |  |
| TITLE          | D, V, S                     | TITLE          |  |
| NAME           | Dhanani, Meenaz             | NAME           |  |
| STREET ADDRESS | 2201 NW 30th Place, Suite A | STREET ADDRESS |  |
| CITY-ST-ZIP    | Pompano Beach, FL 33069     | CITY-ST-ZIP    |  |
| TITLE          | D, V                        | TITLE          |  |
| NAME           | Lal, Sanjay                 | NAME           |  |
| STREET ADDRESS | 2201 NW 30th Place, Suite A | STREET ADDRESS |  |
| CITY-ST-ZIP    | Pompano Beach, FL 33069     | CITY-ST-ZIP    |  |
| TITLE          | D, V                        | TITLE          |  |
| NAME           | Shetty, Dayanand            | NAME           |  |
| STREET ADDRESS | 2201 NW 30th Place, Suite A | STREET ADDRESS |  |
| CITY-ST-ZIP    | Pompano Beach, FL 33069     | CITY-ST-ZIP    |  |

**DO NOT WRITE  
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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:

*Meenaz Dhanani*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Meenaz Dhanani, VP/Sec.

Date

11/21/03

Daytime Phone #

(407) 239-9142

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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