

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2008 8:00 am
Secretary of State

02-06-2008 90029 015 ***158.75

DOCUMENT # V58486

1. Entity Name

TATM/TAMPA, INC.



Principal Place of Business

6600 S.W. 57TH AVE
MIAMI FL 33143
US

Mailing Address

6600 S.W. 57TH AVE
MIAMI FL 33143
US

2. Principal Place of Business - No P.O. Box #

1320 S. DIXIE HIGHWAY

Suite, Apt. #, etc.
SUITE 241

City & State
CORAL GABLES, FL.

Zip Country
33146 USA

3. Mailing Address

1320 S. DIXIE HIGHWAY

Suite, Apt. #, etc.
SUITE 241

City & State
CORAL GABLES, FL.

Zip Country
33146 USA

1st MOORE

CR2E034 (10/07)

4. FEI Number
65-0363088

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BRYER, WARREN
6600 SW 57 AVE
SUITE 500
MIAMI FL 33143

7. Name and Address of New Registered Agent

Name
WARREN BRYER

Street Address (P.O. Box Number is Not Acceptable)
1320 S. DIXIE HIGHWAY

SUITE 241

City **CORAL GABLES, FL.** **FL** Zip Code **33146**

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 nonstatutory)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

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	<input type="checkbox"/> Delete
NAME	ABRAHAM, ANTHONY	
STREET ADDRESS	6600 S.W. 57TH AVE	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE	D	<input type="checkbox"/> Delete
NAME	ABRAHAM, THOMAS T.	
STREET ADDRESS	6600 SW 57 AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	MALOUF, THOMAS H.	
STREET ADDRESS	3109 MOSS DALE LANE	
CITY-ST-ZIP	TAMPA FL	
TITLE	AS	<input type="checkbox"/> Delete
NAME	BRYER, WARREN	
STREET ADDRESS	6600 SW 57TH AVE	
CITY-ST-ZIP	MIAMI F	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABRAHAM, ANTHONY	
STREET ADDRESS	1320 S. DIXIE HIGHWAY - #241	
CITY-ST-ZIP	CORAL GABLES, FL. 33146	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABRAHAM, THOMAS G.	
STREET ADDRESS	1320 S. DIXIE HIGHWAY - #241	
CITY-ST-ZIP	CORAL GABLES, FL. 33146	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALOUF, THOMAS H.	
STREET ADDRESS	3109 MOSS VALE LANE	
CITY-ST-ZIP	TAMPA, FL. 33618	
TITLE	AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRYER, WARREN	
STREET ADDRESS	1320 S. DIXIE HIGHWAY - #241	
CITY-ST-ZIP	CORAL GABLES, FL. 33146	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Anthony R. Abraham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTHONY R. ABRAHAM

01/31/2008 305-665-2222

Date

Daytime Phone #