2001 UNIFORM BUSINESS REPORT (UBR)

0003161 AF

$526.25

FILED
01 APR 16 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # A16337

1. Entity Name

TIGERTAIL LAKE WAREHOUSES, LTD.

Principal Place of Business	Mailing Address
4180 NW 132ND STREET MIAMI FL 33054	4180 NW 132ND STREET MIAMI FL 33054

2. Principal Place of Business	3. Mailing Address
	2850 C STIRLING ROAD
Suite, Apt. #, etc. 2850 C STIRLING ROAD	Suite, Apt. #, etc.
City & State HOLLYWOOD, FL	City & State HOLLYWOOD, FL
Zip 33020 Country BROWARD	Zip 33020 Country BROWARD

4. FEI Number 59-2347366 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ZOROVICH, FRED A. 4180 N.W. 132 ST. MIAMI FL 33054	Name Street Address (P.O. Box Number is Not Acceptable) 2850 C STIRLING ROAD City HOLLYWOOD FL Zip Code 33020

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 _____ 4-13-2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$408,500.00		

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	663159	STREET ADDRESS	2850 C STIRLING ROAD
NAME	WAREHOUSE MANAGEMENT SERVICES, INC.	CITY-ST-ZIP	HOLLYWOOD, FL 33020
STREET ADDRESS	4180 NW 132ND ST.		
CITY-ST-ZIP	MIAMI FL 33054		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	700041043657--3
STREET ADDRESS			-05/01/01--01119--017
CITY-ST-ZIP			****526.25 ****526.25
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

CR2E003 (11/00)

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: _____ 4-13-2001 954-923-1499
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #