2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # M19690** Feb 03, 2000 8:00 am **Secretary of State** TIGER INDUSTRIES, INC. 02-03-2000 90035 022 ***150.00 Principal Place of Business Mailing Address TIGER INDUSTRIES. INC. C/O CHARLES STRANGER .89 NW 8ST. 89 NW 8 ST BOCA RATON FL 33432-2658 **BOCA RATON FL 33432** ئەر ئىلىدارى دە دىرى سارىكى ئۇلىيىغى ئىر US ئىلىنىسىدىد The second secon 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2573774 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GIGGEY, WILLIAM C Street Address (P.O. Box Number is Not Acceptable) 89 NW 8ST. **BOCA RATON FL 33432** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Delete TITLE TITLE STRANGER, CHARLES NAME NAME 89 NW 8ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33432** CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE GIGGEY, WILLIAM C NAME NAME 89 NW 8 ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP - - Addition TITLE . . Change Delete __ TITLE MCGUIRE ROBERT J NAME NAME STREET ADDRESS 89 NW 8 ST STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE GIGGEY, DEBRA L NAME NAME 89 NW 8-ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE MASON, HEPLER NAME 89 NW 8ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR