2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2007
Secretary of State

DOCUMENT# L04000055628

Entity Name: TIGER LILY, LLC

Current Principal Place of Business:

19 W FLAGLER ST, STE 504
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

19 W FLAGLER ST, STE 504
MIAMI, FL 33130

New Mailing Address:

FEI Number: 20-2749353 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARKET, MICHAEL G
19 W FLAGLER ST, STE 504
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BARKET, GEORGE E
Address: 19 W FLAGLER ST, STE 504
City-St-Zip: MIAMI, FL 33130

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BARKET, MICHAEL G
Address: 19 W FLAGLER ST, STE 504
City-St-Zip: MIAMI, FL 33130

Title: MGR ( ) Change (X) Addition
Name: BARKET, TIMOTHY K
Address: 19 WEST FLAGLER STREET, SUITE 504
City-St-Zip: MIAMI, FL 33130

Title: MGR ( ) Change (X) Addition
Name: TOMBLEY, JILL M
Address: 19 WEST FLAGLER STREET, SUITE 504
City-St-Zip: MIAMI, FL 33130

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL G BARKET MBR 04/17/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date