

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000512335

**Entity Name:** TIGER CUBS, LLC**Current Principal Place of Business:**7717 NW 20TH LANE  
GAINESVILLE, FL 32605**Current Mailing Address:**7717 NW 20TH LANE  
GAINESVILLE, FL 32605**FEI Number:** 88-1726117**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOUKHTARA NEMER, SILVIA H  
7717 NW 20TH LANE  
GAINESVILLE, FL 32605 US*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

**Authorized Person(s) Detail :**

Title	MGR
Name	MOUKHTARA NEMER, SILVIA
Address	7807 NW 18TH LN
City-State-Zip:	GAINESVILLE FL 32605

Title	AMBR
Name	MOUKHTARA NEMER, SILVIA
Address	7807 NW 18TH LN
City-State-Zip:	GAINESVILLE FL 32605

Title	MGR
Name	NEMER, BASSEL
Address	7807 NW 18TH LN
City-State-Zip:	GAINESVILLE FL 32605

Title	AMBR
Name	NEMER, BASSEL
Address	7807 NW 18TH LN
City-State-Zip:	GAINESVILLE FL 32605

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SILVIA MOUKHTARA NEMER**MANAGER****04/10/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date