




**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 13, 2007 08:00 AM
Secretary of State

DOCUMENT # F05000005655		
1. Entity Name TIGER NAVIERA, INC.		
Principal Place of Business 1799 NE 164TH ST #111 N. MIAMI, FL 33162		Mailing Address 1799 NE 164TH ST #111 N. MIAMI, FL 33162
DO NOT WRITE IN THIS SPACE		
		 07232007 No Chg-P CR2E034 (11/05)
4. FEI Number 20-3601456		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent PBA FINANCIAL SERVICES CORP 13935 NW 1ST AVE. MIAMI, FL 33168		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BENSKY, JOHN 1799 NE 164TH ST #111 N. MIAMI, FL 33162	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DE TORRES, BRENDA PATINO 1799 NE 164TH ST #111 N. MIAMI, FL 33162	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LANDIRES MONGE, ANABEL LORENA 1799 NE 164TH ST #111 N. MIAMI, FL 33162	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: 		09-10-07
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>