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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Montalano
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G21889**

(2)

1. Corporation Name

TIGER ENTERPRISES, INC.



Principal Place of Business

**% PAUL R. RUTLEDGE
3048 N.W. 26TH AVE.
BOCA RATON FL 33434**

Mailing Address

**% PAUL R. RUTLEDGE
3048 N.W. 26TH AVE.
BOCA RATON FL 33434**

2. Principal Place of Business

2a. Mailing Address

21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

**RUTLEDGE, PAUL R
3048 N.W. 26TH AVE.
BOCA RATON FL 33434**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.0602 and 607.1504, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to sign this statement

Signature of the person who is authorized to sign this statement

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	☐ DELETE
	DP	RUTLEDGE, PAUL	3048 N.W. 26TH AVE.	
		BOCA RATON FL		
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	☐ DELETE

13.

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY, ST, ZIP	9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY, ST, ZIP	13. TITLE	14. NAME	15. STREET ADDRESS	16. CITY, ST, ZIP	17. TITLE	18. NAME	19. STREET ADDRESS	20. CITY, ST, ZIP

14. I do hereby certify that the information supplied by me to the foregoing voluntarily furnished and does not qualify for the exemption stated in Section 119.07(5)(b), Florida Statutes. I further certify that the information included in this annual report or supplemental annual 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; the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or in a change of or creation of a new officer or director.

SIGNATURE:

Paul R. Rutledge
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-96

707-483-3081

Telephone Number

CR2E034 (12/95)