

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 31, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000007485

1. Entity Name

TIGER EYE LICENSING, L.L.C.



Principal Place of Business

**3400 LAKESIDE DR
SUITE 500
MIRAMAR, FL 33027**

Mailing Address

**3400 LAKESIDE DR
SUITE 500
MIRAMAR, FL 33027**

DO NOT WRITE IN THIS SPACE



01122006 No Chg-LLC

CR2E0B3 (11/05)

4. FEI Number

65-1040183

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**COLLETTI, JOSEPH R
3550 BISCAYNE BLVD
SUITE 610
MIAMI, FL 33137**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
KYLE, JOHN N II
3400 LAKESIDE DR SUITE 500
MIRAMAR, FL 33027**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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**L000000487430
04/13/06-80077-010 50.00**

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IN THIS SPACE**

11. 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 is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

3/24/06

Date

Daytime Phone #