## 2002 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

99 S.E 1ST AVE

3. Mailing Address

City & State

Suite, Apt. #, etc.

**BOCA RATON FL 33432** 

DOCUMENT # L0100006636

Country

4800 N. FEDERAL HWY, STE 307B

6. Name and Address of Current Registered Agent

1. Entity Name TIGA, L.L.C.

99 S.E 1ST AVE

Principal Place of Business

2. Principal Place of Business

GEROW, JEFFREY S

**BOCA RATON FL 33431** 

**BOCA RATON FL 33432** 

Suite, Apl. #, etc.

City & State

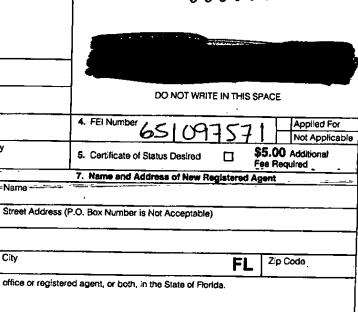
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## **FILED** May 29, 2002 8:00 am Secretary of State

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City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE MGR TITLE ☐ Delete ☐ Change ■ Addition NAME MUSCO, MARK NAME STREET ADDRESS 99 S.E 1ST AVE STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33432** CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE \* Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delate TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Celete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ππ.e ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

Country

≃Name

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of the repelver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

IG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

86

Daytime Phone