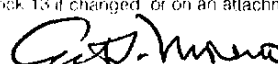


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 ,

FILED
Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M29899 (5) 1. Corporation Name TIGER-TIGER, INC.			
Principal Place of Business 13122 W. Dixie Hwy N Miami, FL 33161		Mailing Address 13122 W. Dixie Hwy N Miami, FL 33161	
2. Principal Place of Business		3a. Date of Last Report 01/25/96	
21. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 04/03/1986	
22. City & State		4. FEL Number 59-2663372	
23. Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24. Country		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
26. Mailing Address		9. Name and Address of Current Registered Agent	
27. Suite, Apt. #, etc.		10. Name and Address of New Registered Agent	
28. City & State		81. Name	
29. Zip		82. Street Address (P.O. Box Number is Not Acceptable)	
30. Country		83.	
		84. City	
		85. Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, Section 607.0505, Florida Statutes.			
SIGNATURE: _____ DATE: _____ (Type, print, or type and print name of registered agent and filer if applicable. (NOTE: Registered Agent signature required when reinstating.)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE ☐ DELETE		1.1 TITLE ☐ Change ☐ Addition	
NAME DP MORENO, ARTHUR S.		1.2 NAME	
STREET ADDRESS 13122 W Dixie Hwy		1.3 STREET ADDRESS	
CITY- ST- ZIP N. Miami, FL 33161		1.4 CITY- ST- ZIP	
2. TITLE ☐ DELETE		2.1 TITLE ☐ Change ☐ Addition	
NAME DPV MORENO, CHRISTINE M		2.2 NAME	
STREET ADDRESS 13122 W Dixie Hwy		2.3 STREET ADDRESS	
CITY- ST- ZIP N. Miami, FL 33161		2.4 CITY- ST- ZIP	
3. TITLE ☐ DELETE		3.1 TITLE ☐ Change ☐ Addition	
NAME DS EVANS, SHARON A		3.2 NAME	
STREET ADDRESS 13122 W Dixie Hwy		3.3 STREET ADDRESS	
CITY- ST- ZIP N Miami, FL 33161		3.4 CITY- ST- ZIP	
4. TITLE ☐ DELETE		4.1 TITLE ☐ Change ☐ Addition	
NAME DT MORENO, CHRISTINE		4.2 NAME	
STREET ADDRESS 13122 W Dixie Hwy		4.3 STREET ADDRESS	
CITY- ST- ZIP N Miami, FL 33161		4.4 CITY- ST- ZIP	
5. TITLE ☐ DELETE		5.1 TITLE ☐ Change ☐ Addition	
NAME DAV MORENO, SUSANNE		5.2 NAME	
STREET ADDRESS 13122 W Dixie Hwy		5.3 STREET ADDRESS	
CITY- ST- ZIP N Miami, FL 33161		5.4 CITY- ST- ZIP	
6. TITLE ☐ DELETE		6.1 TITLE ☐ Change ☐ Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	
14. I do 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 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: 		4/14/97 305 893 2255	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034 (9/96)

RW
4-28-97

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