2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000003760

City-St-Zip:

FILED Oct 05, 2009 Secretary of State

Entity Na	me: TIGER FUND, INC.		•	
Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
21218 ST. ANDREWS BLVD. #641 BOCA RATON, FL 33433		#451	934 N. UNIVERSITY DR. #451 CORAL SPRINGS, FL 33071	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
P.O. BOX PONTE VE	3594 EDRA, FL 32004			
In accordan	: 04-3681131 FEI Number Applied For () ice with s. 607.193(2)(b), F.S., the corporation did	•	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of N	New Registered Agent:	
	DALE BILL PALM DRIVE EDRA, FL 32082 US			
	e named entity submits this statement for the e of Florida.	purpose of changing its registered of	office or registered agent, or both,	
SIGNATU	RE: DALE GILBERT			
	Electronic Signature of Registered A	gent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DIR () Delete GILBERT, DALE 120 SAWBILL PALM DRIVE PONTE VEDRA, FL 32082	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	DIR () Delete GILBERT, MARSHELLA 442 9TH AVE MENLO PARK, CA 94025	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	DIR () Delete PKHAKADZE, NATASHA 518 NORTH FEDERAL #13 LAKE WORTH, FL 33460	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	() Delete	Name: VENEZLA, JOH) Change (X) Addition IN AMPLE ROAD BLDG 9 SUITE 3B	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DALE GILBERT DIR 10/05/2009

PONPANO BEACH, FL 33073