

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006354

FILED  
Aug 25, 2009  
Secretary of State

Entity Name: PALM BEACH TIGERS SPORTING CLUB INC

## Current Principal Place of Business:

2511 WESTGATE AVE  
#9  
WEST PALM BEACH, FL 33409

## New Principal Place of Business:

## Current Mailing Address:

2511 WESTGATE AVE  
#9  
WEST PALM BEACH, FL 33409

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

MURAD, MOHAMMED H  
2234 STOTESBURY WAY  
WELLINGTON, FL 33414 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MURAD, MOHAMMED H  
Address: 2234 STOTESBURY WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: VPSR ( ) Delete  
Name: HOSSAIN, MOHAMMED Z  
Address: 537 A1 SHADY PINE WAY  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP ( ) Delete  
Name: HOSSAIN, MOHAMMOD S  
Address: 4579 EMERALD VISTA APT E144  
City-St-Zip: LAKE WORTH, FL 33461

Title: SCY ( ) Delete  
Name: SATTAR, MOHAMMAD B  
Address: 1815 LAKE AVE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: JSCY ( ) Delete  
Name: UDDIN, MOHAMMAD N  
Address: 3506 INLET CIR  
City-St-Zip: GREENACRES, FL 33463

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: MURAD, MOHAMMED H

P

08/25/2009

Electronic Signature of Signing Officer or Director

Date