## FILED Jul 24, 2001 8:00 am

DOCUMENT # \$600000 17 198					Jul 24, 2001 8:00 am Secretary of State			
Tigerspice, INC.					07-24-2001 90013 040 ***150.00			
Principal Place of Business Mailing Address								
3389	Sheridan St							
3389 Sheridan St 3389 Sheridan St Suite 214 Suite 214					A0078962			
Hollywood, FL 33021 Hollywood, FL 33021  2. Principal Place of Business  3. Mailing Address					· v	MARION	· UH	
312		3120 N. 36+h Ave						
Suite, Äpt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State HOII 4 wood Fi		City & State HOLLY WOOD FL			4. FEI Number	063957	<u> </u>	plied For
Zip 3 30	Country	Zip	Country		5. Certificate of Status	Desired	<b>\$8.75</b> Add	
7.50	6. Name and Address of Current R	3302/	USA		7. Name and Address	of New Registered	Fee Required Agent	<u> </u>
Toula Kokolis								
Street Add					O. Box Number is Not A	Acceptable)		
Jost Trell war since								···
Suite 214			CityHol	164.0	and d	FL	Zip Code <b>3 3</b>	9
	hamed entity submits this statement for			•		· <u> </u> 33	021	
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 reinstatung)  DATE								
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so:					10. Election Car Trust Fund C	mpaign Financing		May Be
<u> </u>	ria on back)	Make Check Payable	·	of State				
11.	PVST D	Delete	12.		ADDITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS Change	Addition
NAME	Toula Kokolis	NAME		4 <b>5</b> .4. A.			<b></b>	
STREET ADDRESS CITY-ST-ZIP	1 2 26 1 21 C. (Carr C			BIZO N. 36th Avenue Holywood 7L 33021				
TITLE	Hollywood FI 3302	Delete	TITLE	11011	ywood 15		Change	Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					•
TITLE		☐ Delete	TITLE				Change	Addition
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CITY-ST-ZIP			CITY-ST-ZIP			; )		
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name Street address			NAME STREET ADDRESS					
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CITY-ST-ZIP			CITY-ST-ZIP	-12-6	140.07/6\(\frac{1}{2}\)		ath above to a tr	lovenot's s
13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.								
SIGNATURE: July Lot Toula Kokolis 7/12/01								
SIGNATURE:								

2001 UNIFORM BUSINESS REPORT (UBR)

AHachment DAPOUXXXXIII98 AW18982

## TIGERSPICE, INC. 3120 NORTH 36<sup>TH</sup> AVENUE HOLLYWOOD, FLORIDA 33021

July 12, 2001

State of Florida Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:

**UNIFORM BUSINESS REPORT** 

TIGERSPICE, INC.

DOCUMENT # P00000017198

FEIN # 65-1003957

Dear Sir/Madam:

Please be advised that we did not receive the pre printed/original Uniform Business Report Packet for 2000 for the above-mentioned corporation as we had moved and had a problem with our mail being forwarded properly.

Enclosed please find a check in the amount of \$150.00 for the original fee with the signed report.

Thank you for your cooperation in this matter.

Sincerely,

Toula Kokolis President