


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
03 DEC 24 AM 8:51SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P00000101497 3003					
1. Corporation Name LITTLE TIGER ENTERPRISES, INC.					
2. Principal Office Address 2100 45TH ST. Suite, Apt. #, etc. B 26 City & State WEST PALM BEACH, FL Zip 33407-2070			3. Mailing Office Address 2100 45TH ST. Suite, Apt. #, etc. B 26 City & State WEST PALM BEACH Zip 33407-2070		

REINSTATEMENT **03**200025738792
12/24/03--01004--028 **150.00

4. Date Incorporated or Qualified To Do Business in Florida		10/27/2000
5. FEI Number	Applied For Not Applicable	
65-1049260		
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent			
Name SALEH, MAYSOON			
Street Address (P.O. Box Number is Not Acceptable) 2100 45 STREET			
Suite, Apt. #, Etc. SUITE B-26			
City WEST PALM BEACH		State FL	Zip Code 33407-2070

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.			
Signature of Registered Agent <i>x Salim Hilo</i>		Date 12/17/2003	
REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	HILO, SALIM A	2100 45TH ST. STE B26	WEST PALM BEACH
D	SALEH, KHALED B	2100 45TH ST. STE B26	WEST PALM BEACH
D	SALEH, MAYSOON	2100 45TH ST STE B26	WEST PALM BEACH
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(f), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: <i>x Salim Hilo</i>		PRESIDENT	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #
		12/17/2003	561-8452639

CR2E031 (10/02)

KATTOURA & ASSOCIATES, INC.
ACCOUNTING, BOOKKEEPING & TAX SERVICES

1499 West Palmetto Pk Rd, Suite 416
Boca Raton, FL 33432
TEL: (561) 362-0491

P.O. Box 728
Boca Raton, FL 33429
FAX: (561) 394-5134

National Society of Tax Professional

December 17, 2003

Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

REF: LITTLE TIGER ENTERPRISES, INC.
DOCUMENT # P00000101497

Dears Sirs,

The above referenced corporation has never received any notices before at all. We are enclosing the report and a check in the amount of \$ 150.00 for 2003 . Please accept this annual report as reinstatement.

Although we would like to verify our address currently is the right one as we show in the annual report form.

Thank you for your cooperation in this matter.

If you have any further question, please do not hesitate to contact us.

Sincerely


Andre K Kattoura

Enclosure
Ck \$ 150,00 Fee.