


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000043016 1. Entity Name TIGER TOWING SERVICE, INC.	
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Principal Place of Business 1735 SW 21TH TERR MIAMI, FL 33145	Mailing Address 1735 SW 21TH TERR MIAMI, FL 33145
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DO NOT WRITE IN THIS SPACE



03182005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1099026	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent REQUEJO, JORGE A 1735 SW 21TH TERR MIAMI, FL 33145
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD REQUEJO, JORGE A 1735 SW 21 TERR MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD VELAZQUEZ, JUANITA 1735 SW 21TH TERR MIAMI, FL 33145
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U000000318612
04/20/05-80065-020 150.00

U000000318612
04/20/05-80065-021 8.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4/5/05 Date	305-5100525 Daytime Phone #
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