

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90024 005 ***150.00

DOCUMENT # P02000056983

1. Entity Name

TIGER CLEANING SERVICE, INC.



Principal Place of Business

2900 STATE ROAD A1A #610
ATLANTIC BEACH FL 32233

Mailing Address

2900 STATE ROAD A1A #610
ATLANTIC BEACH FL 32233



2. Principal Place of Business - No P.O. Box #

3106 Hanging Rock Ct.

Suite, Apt. #, etc.

3. Mailing Address

3106 Hanging Rock Ct.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Jacksonville FL

City & State

Jacksonville FL

4. FEI Number 68-0505898

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, TYRONE
2900 STATE ROAD A1A #610
ATLANTIC BEACH FL 32233

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is not Acceptable)

3106 Hanging Rock Ct.

Jacksonville

FL

Zip Code 32246

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPTS ☐ Delete
NAME JOHNSON, TYRONE
STREET ADDRESS 2900 STATE ROAD A1A #610
CITY-STATE-ZIP ATLANTIC BEACH FL 32233

TITLE ☒ Change ☐ Addition
NAME 3106 Hanging Rock Ct.
STREET ADDRESS Jacksonville FL 32246
CITY-STATE-ZIP

TITLE VP ☐ Delete
NAME JOHNSON, DIANE
STREET ADDRESS 2900 SR A1A, #610
CITY-STATE-ZIP ATLANTIC BEACH FL 32233

TITLE ☒ Change ☐ Addition
NAME 3106 Hanging Rock Ct.
STREET ADDRESS Jacksonville FL 32246
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
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CITY-STATE-ZIP

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CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Diane Johnson Diane Johnson 3/29/07 (404) 5632475
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #