


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90005 049 \*\*\*150.00

<b>DOCUMENT # P05000136766</b> 1. Entity Name <b>TIJUANA IGUANA INC</b>																													
Principal Place of Business <b>3105 W.WATERS AVE SUITE#315 TAMPA, FL 33614</b>			Mailing Address <b>3105 W.WATERS AVE SUITE#315 TAMPA, FL 33614</b>																										
2. Principal Place of Business - No P.O. Box # <b>ONE TAMPA CITY CENTER</b> Suite, Apt. #, etc. <b>SUITE 2505</b> City & State <b>TAMPA FL</b> Zip <b>33602</b>		3. Mailing Address <b>ONE TAMPA CITY CENTER</b> Suite, Apt. #, etc. <b>SUITE 2505</b> City & State <b>TAMPA FL</b> Zip <b>33602</b>		4. FEI Number <b>APPLIED FOR 205147254</b> Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		6. Name and Address of Current Registered Agent <b>LALWANI, INDIRA 3105 W.WATERS AVE SUITE#315 TAMPA, FL 33614</b>																											
7. Name and Address of New Registered Agent Name <b>PUNWANI, AMEET</b> Street Address (P.O. Box Number is Not Acceptable) <b>ONE TAMPA CITY CENTER</b> <b>SUITE 2505</b> City <b>TAMPA</b>		FL Zip Code <b>33602</b>																											
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 <u><i>[Signature]</i></u> <b>Ameet A Punwani</b> <b>4.19.07</b> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																													
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">PD</td> <td style="width:10%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>LALWANI, JIWAT</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3105 W.WATERS AVE, SUITE#315</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMPA, FL 33614</td> <td></td> </tr> </table>			TITLE	PD	<input checked="" type="checkbox"/> Delete	NAME	LALWANI, JIWAT		STREET ADDRESS	3105 W.WATERS AVE, SUITE#315		CITY-ST-ZIP	TAMPA, FL 33614		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">LALWANI, JIWAT</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>ONE TAMPA CITY CENTER SUITE 2505</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>TAMPA FL 33602</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	LALWANI, JIWAT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	ONE TAMPA CITY CENTER SUITE 2505		STREET ADDRESS	TAMPA FL 33602		CITY-ST-ZIP		
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**SIGNATURE:** *[Signature]* **J.S. LALWANI**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/19/07**  
Date

**873-600-2984**  
Daytime Phone #

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.