## 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Apr 25, 2008 08:00 AM DOCUMENT # P05000154782 **Secretary of State** 1. Entity Name TIGER-VAC INC. Principal Place of Business Mailing Address 73 SW 12 AVE BLDG #1 UNIT #7 73 SW 12 AVE BLDG #1 UNIT #7 DANIA BEACH FL 33021 DANIA BEACH FL 33021 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 14-1642152 Not Applicable Zip Country Ζp Country \$8.75 Additional 5. Certificate of Status Desired Z Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARIANI, ROCCO Street Address (P.O. Box Number is Not Acceptable) 2000 S. OCEAN BLVD. SPT.#10C LAUDERDALE-BY-THE-SEA FL 33062-8035 City Zip Code 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 Synature, typed or printed name of registered agent and the Example action. (NOTE: Registired Agent eginalure required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. TITLE ☐ Delete THE Change Addition NAME MARIANI, ROCCO NAME U000000923615 STREET ADDRESS 2000 S. OCEAN BLVD, APT, #10C STREET ADDRESS 05/16/08-80036-019 317.50 CITY-ST-ZIP LAUDERDALE-BY-THE-SEA FL 33062-8035 CITY-ST-ZIP TITLE Delete TITLE Change Addition MARIANI, FRANK NAME NAME STREET ADDRESS 2000 S. OCEAN BLVD. APT, #10C STREET ADDRESS CITY-ST-ZIP LAUDERDALE-BY-THE-SEA FL 33062-8035 CITY-ST-ZIP Derete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 111LE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP TITLE Deiele TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119. Florida Statutes, I further certify that the information

SIGNATURE: THO R. Mi / VITO ROCCO MARIANI - CONTRALER 4/17/08 (800) 668-4437

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.