

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000087152

1. Entity Name

TIGER EYE INTERNATIONAL CORP.

Principal Place of Business

Mailing Address

10155 Collins Avenue  
Unit 303  
Miami Beach, Florida 33154

*Amended UBR*

**FILED**

01 MAY 30 PM 1:56

SECRETARY OF STATE

2. Principal Place of Business

3. Mailing Address

Suite, Apt., #, etc.

Suite, Apt., #, etc.

City & State

City & State

4. FEI Number

65-0455892

Applied For

Not Applicable

Zip

Country

Zip

Country

USA

6. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

M. Tachibana  
1000 Quayside Terr, #1608  
Miami, FL 33138

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution

\$6.00 May Be Added to Fee

11. OFFICERS AND DIRECTORS

TITLE: D VPST  DELETE  
NAME: RAJA, ALDO RAFAEL A.  
STREET ADDRESS: 10155 Collins Avenue, #301  
CITY-ST-ZIP: Miami Beach, FL 33154

TITLE: DP  DELETE  
NAME: RAJA, SUMAIA L.  
STREET ADDRESS: 10155 Collins Avenue, #301  
CITY-ST-ZIP: Miami Beach, FL 33154

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11 TITLE:  Change  Addition  
12 NAME:  
13 STREET ADDRESS: 500004439815--9  
14 CITY-ST-ZIP: -06/25/01--0117--021

21 TITLE: \*\*\*\*\*61.25  Change  Addition  
22 NAME:  
23 STREET ADDRESS:  
24 CITY-ST-ZIP: LS

31 TITLE:  Change  Addition  
32 NAME:  
33 STREET ADDRESS:  
34 CITY-ST-ZIP:

41 TITLE:  Change  Addition  
42 NAME:  
43 STREET ADDRESS:  
44 CITY-ST-ZIP:

51 TITLE:  Change  Addition  
52 NAME:  
53 STREET ADDRESS:  
54 CITY-ST-ZIP:

61 TITLE:  Change  Addition  
62 NAME:  
63 STREET ADDRESS:  
64 CITY-ST-ZIP:

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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.

SIGNATURE:

*[Handwritten Signature]*

5/10/01

(305) 861 6674