SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| DOCUMENT # | P95000084391 | (8) |
|------------|--------------|-----|
| | | |

THREE TIGERS, INC.

| Principal | Place | of I | Business |
|-----------|-------|------|----------|

274 ROBIN DRIVE

Mailing Address

274 ROBIN DRIVE



97 AUG -4 PH 12: 143

SECRETARY OF STATE TALL AHASSEF FLORIDA



| ARASOTA FL 34236 | | SARASOTA FL 34236 | | | DO NOT WRITE IN THIS SPACE | | | |
|---|---------------------------|-----------------------|-------|--|----------------------------------|---|----------|--------------------------------|
| | | | | | | 3. Date Incorporated or Qualified | 3a. D | ate of Last Report |
| | | | | | | 10/30/1995 | 05 | /01/1996 |
| Principal Plac | e of Business | 2a. Mailing Ad | dress | | | 4. FEI Number | | Applied For |
| | | 26 | | | | 65-0632918 | | Not Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | #, etc. | С. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & State | | City & Stat | c | | | Election Campaign Financing Trust Fund Contribution | | \$5.00 May Be Added to Fees |
| Zip | Country 25 | Zip 29 | 30 | untry | | 8. This corporation owes or has pai Personal Property Tax due June | 30. | XYes □ No///A |
| | 9. Name and Address of Cu | rrent Registered Agen | t | Ļ., | | 10. Name and Address of New Reg | sistered | Agent |
| WETTE | ERGREN, OLA H | | | 81 | Name | | | |
| 274 ROBIN DRIVE SARASOTA FL 34236 | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| 0,4,5,4 | | | | 83 | | | | |
| | | | | 0.4 | City | | | or Zin Codo |

11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered

| agent. La | m familiar with, and accept the obligations of, Section 60. | 7.0505, Florid | a Statutes. | |
|---------------------------------------|--|----------------|--|--|
| SIGNATURE | Stonature, typed or printed name of registered agent and title if applicable | (NOTE: R | ogistored Agent signature | required when reinstating) DATE |
| 12. | OFFICERS AND DIRECTORS | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WETTERGREN, OLA H 274 ROBIN DRIVE SARASOTA FL 34236 | DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS. 1.4 CITY-ST-ZIP | 100002262401—8 -08/08/97-01134-026 ****165.00 ****165.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | DELETE | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | Change Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <u> </u> | DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS | · | DELETE | 61 THLE 62 NAME 6.3 STREET ADDRESS | ☐ Change ☐ Addition |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under a lam an officer or director of the correction or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 that god, so that an address.



Division of Corporations Annual Reports Section P.O. Box 1500 Tallahassee, FL. 32302-1500

Sarasota July 28, 1997

Gentlemen:

Enclosed find an Annual Report for Three Tigers, Inc., FEI 65-0632918. This is sent in response to the 2nd notice we received in the mail.

The original Annual Report for 1997 was mailed on 4/15/97. A copy is enclosed for your information.

I have checked the bank records and the original check mailed has not cleared the bank. I have therefore filled in the 2nd notice, but request your cooperation in accepting the check in the original amount of \$ 165, rather than the fee of \$ 550 including the penalty.

Please don't hesitate to contact me if you have any questions or will not accept the check in the amount of \$ 165.

Thank you in advance!

Sincerely,

Ola Wettergren, Director Three Tiger's, Inc. 274 Robin Drive Sarasota, FL. 34236

Tel. 941-359-3267 Fax 941-359-3828