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FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000039544 (7)

1. Corporation Name

TIGER SECURITY AND INVESTIGATIONS INC.

Principal Place of Business

150 S HWY 17-82
SUITE 2 NATIONS BANK BLDG
DEBARY FL 32713

Mailing Address

150 S HWY 17-82
SUITE 2 NATIONS BANK BLDG
DEBARY FL 32713

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/08/1996

4. FEI Number

59-3387769

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 879 N. Volusia Ave

Suite, Apt. #, etc.

22 Suite C

City & State

23 Orange City

Zip

24 32763

Country

25 Volusia

2a. Mailing Address

26 879 N. Volusia Ave

Suite, Apt. #, etc.

27 Suite C

City & State

28 Orange City

Zip

29 32763

Country

30 Volusia

9. Name and Address of Current Registered Agent

ABELES, HOWARD
150 S HWY 17-82
SUITE 2 NATIONS BANK BLDG
DEBARY FL 32713

10. Name and Address of New Registered Agent

81 Name

Helen M. Hendrickson

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

879 N. Volusia Ave

83 Suite C

84 City

Orange City

FL

85 Zip Code

32763

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Helen M. Hendrickson

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

(NOTE: Registered Agent signature required when reinstating)

4/29/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D / Secretary
DAVIS, JAMES M
STREET ADDRESS 351 W VIRGINIA AVE
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE ☐ DELETE

NAME D / President
VEGA, MIKE
STREET ADDRESS 829 HENDERSON ST
CITY-ST-ZIP DELTONA FL 32725

TITLE ☐ DELETE

NAME OSBORNE, CHARLES
STREET ADDRESS 1861 N SPARKMAN AVE
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

1011 Gerona Ave
Deltona FL 32725

D/Treasurer
Hendrickson, Helen M.
1011 Gerona Ave
Deltona FL 32725

D/Vice Pres
Robert J Hubbes
225 Jarvis Ave
Orange City FL 32763

14. I 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 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, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Helen M. Hendrickson

4/29/98

004-744-7040

CR2E034 (10/97)