## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700009502 (0)

**NEW TIGER HOLDINGS INC.** 

Principal Place of Business	Mailing Address
10300 SUNSET DRIVE #272	10300 SUNSET DRIVE #272
I MIAMI FL 33173	MIAMI FL 33173

FILED
May 27 1998 8:00am
Secretary of State



MIAMI FL 331	73	MIAMI FL 33173				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						01/30/1997
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				Not Applicable
Suite, Apt #	t, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28	.,			Trust Fund Contribution Added to Fees
Zip	Country	Zip	<del></del>	untry		8. This corporation owes or has paid the current year Intangible
24	25	[29]	30]	<del></del>		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered Agent
	AMI CORPORTE SYSTEMS, INC.			"	Name	
	00 BLUE LAGOON DRIVE			82	Street /	Address (P.O. Box Number is Not Acceptable)
	ITE 700			83		
MIA	MI FL 33126			03		
				84	City	FL 85 Zip Code
				<u> </u>	L	corporation submits this statement for the purpose of changing its registered
office or re agent. I ar	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida, Such ch <b>ange w</b> as lions of, Section 607.0505, F	authorize Iorida Sta	ed by atutes	the corp	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature typed or printed name of registered agen	and title if applicable (NO	TE: Register	ed Age	nl signature	required when reinstating) DATE
12. 1	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.11	ITLE		Change Addition
NAME	ISHOOF, ASAD		121	NAME		
STREET ADDRESS	10300 SUNSET DRIVE #272		1.3 5	STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33173		1.40	CITY-S	T-ZIP	
TITLE	D	☐ DELETE	2.1 1	TITLE		☐ Change ☐ Addition
NAME	KHAN ISHOFF, SAIF YAMANI		2.21	NAME		
STREET ADDRESS	10300 SUNSET DRIVE #272		2.3 5	STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33173		2.4	CITY-S	ST-ZIP	
TITLE	<del>-</del>	☐ DELETE	3.11	TITLE	ļ	Change Addition
NAME			3.21	NAME		
STREET ADDRESS			3.3	STREET	ADDRESS	
CITY-ST-ZIP			3.4.	CITY -	ST-ZIP	
TITLE	<del></del>	☐ DELETE	4.1	TITLE		Change Addition
NAME			4. 2	NAME		·
STREET ADDRESS			4.3	STREET	ADDRESS	
CITY-ST-ZIP			_	CITY-S	J - ZIP	1100
TITLE		☐ DELETE	5.1	TITLE		Change Addition
NAME			5.2	NAME		
STREET ADDRESS			5.3	STREET	ADDRESS	
CITY-ST-ZIP				CITY-S	J-ZIP	
TITLE		☐ DELETE	6.1	TITLE		Change Addition
NAME			6.2	NAME		!
STREET ADDRESS			6.3	STREET	ADDRESS	
CITY-ST-ZIP			6.4	CITY - S	IT-ZIP	

I. 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 eath; that I am an officer or director of the corporation or line receiver or trustice 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 or an attachment with an address.

1/22/98.