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

CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000092735 (4)

TIGER CONSTRUCTORS, INC.

## **FILED** Jan 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address											1100	11 <b>11 11 11 11</b>		••;;; ••;		511 <b>0</b>   5110	3100 101			
32 N KIRKMAN, STE 2 32 N KIRKMAN, STE 2						2														
ORLANDO FL 32811				ORLANDO FL 32811							DO NOT WRITE IN THIS SPACE									
											. Date In	corpora				1111000	, 102			
										] "		7/199		acoun.ic						
2 Principal P	lace of Busin	nece		2a M	ailing Address					4	EELNu		·		_			Δnr	olied F	-01
2. Principal Place of Business				26						"	59	-34	וואר	05	-		$\vdash$	<del></del>	Appli	
Suite, Apt. #, etc.				Suite, Apt. #, etc.							<u> </u>		_11				\$8.7		ddition	
22				27						5.	. Certific	ate of S	tatus D	esired		J			quired	
City & State				City & State						6.	. Electio	n Camo	alan Fir	ancino	3		\$5.	OO	Mav B	<u> </u>
23				28						"		und Cor	_	-	ັ ⊑	]			Fees	
Zip	Country			Zip Cor			Country	ountry			. This co	rporatio	n owes	or has	paid th	ne curre	nt yea	r inta	ngible	,
24		25	1	29		30					Person	al Prope	rty Tax	due Ju	une 30.	X	Yes		No	
9. Name and Address of Current				Registered Agent						10.	. Name	and Ad	dress c	f New	Regist	ered A	gent			
PC	OSPISIL, GI	ERALD B					81	1	Vame											
32 N KIRKMAN, STE 2							82	82 Street Address (P.O. Box Number is Not Acceptab							otable)					
	RLANDO FI	•							50,000,7000	· , • • • • • • • • • • • • • • • • • •				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,					
							83													
							84	1	City			-					85	Zip C	ode	
								'	•							<u>FL</u>		•		
11. Pursuant	to the provis	ions of Section	ns 607.0502 an	nd 607.	1508, Fiorida Stat Such change wa ection 607.0505,	tutes, the	e above	e-n	amed cor	rporatio	on submi	its this s	tatemer	nt for th	e purbo	ose of c	hangir	ng its	regist	tered
agent. I a	registered açı ım familiar w	ith, and accep	t the obligation	nonca. ns of, Se	ection 607.0505,	Florida :	Statutes	yuı S.	ie corbore	auon s i	Doard O	unecto	3, 1 HÇI	eby ac	cept till	c appoi	HULIGIL	. 45	egrace	100
SIGNATURE																				
	Signature, lyped	or printed name of	registered agent and	d title it ap				ent s	signature requ				11050	TO 05		ATE	Sieca	7.4.FX	STR. 40	
12.			ICERS AND DI		ORS   nevere		13.		- 1		ADDITIO	JNS/CH/	NGES	10 01	FICERS		Chan			ddition
TITLE	Jack G. Christison					1	1.1 TITLE											igo	^	Middi
NAME 830 WILKINSON ST								1.2 NAME												
STREET ADDRESS				3.			1.3 STREET ADDRESS													
CITY-ST-ZIP ORLANDO, FL						_	1.4 CITY-ST-ZIP 2.1 TITLE										Chan	ine	T Ac	ddition
TITLE	Vice President, Secretary, Tre ASONEE						<b>1</b> 1									_		ıgv	··	.dit.on
NAME	Vera Posorial						2.2 NAME 2.3 STREET ADDRESS													
STREET ADDRESS	3//04-11 ibsomile_ C								I											
CITY-ST-ZIP	-SI-ZIP WINDERNEYE, FC							2. 4 CITY - ST - ZIP 3.1 TITLE									Chan	ine	I A	ddition
TITLE					☐ DETEIG	_										_	_ ~~	.94	~	-3111911
NAME							2 NAME	. A.T.	DDECC											
STREET ADDRESS							3.3 STREET		I											
CITY-ST-ZIP					DELETE		.4. CITY - S I.1 TITLE	SI - I	ur								Chan	ne	Δι	ddition
TITLE						1	. 2 NAME		1							-	_ 0.40.1	.90	^~	
NAME						- II '			porce											
STREET ADDRESS						- 1	.3 STREET													ļ
CITY-ST-ZIP					DELETE		.4 CITY - S .1 TITLE	>I - Z	ur (								Chan	noe	Ar	ddition
TITLE							2 NAME									_				
NAME						1			aneco											ĺ
STREET ADDRESS							.3 STREET		· I											
CITY-ST-ZIP					DELETE		4 CITY-S	37 - Z	SP							ŗ	_ Chan	ппе	∐ Ac	idition
TITLE					T DETEN		,1 TITLE									Ĺ	_ 04601	, A C	، ب	
NAME							.2 NAME													
STREET ADDRESS							.3 STREET													
CITY-ST-ZIP						6	.4 CITY - S	T- Z	ZIP								· 6 . 12 1		-	

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 informatio 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 cyrporation 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 appearance with an address.