

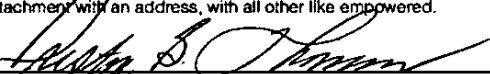


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90060 035 ***150.00

DOCUMENT # P99000078471					
1. Entity Name TIDE AND TIGER, INC.					
Principal Place of Business 1901 60TH PL E STE L 2450 BRADENTON, FL 34203			Mailing Address 1901 60TH PL E STE L 2450 BRADENTON, FL 34203		
2. Principal Place of Business - No P.O. Box # C/O HUGO ZEPEDA EPS-D3059 Suite, Apt. #, etc. 7801 N.W. 37 th ST. City & State DORAL, FL Zip 33166 Country USA		3. Mailing Address C/O HUGO ZEPEDA EPS-D3059 Suite, Apt. #, etc. 7801 N.W. 37 th ST. City & State DORAL, FL Zip 33166 Country USA			
4. FEI Number 59-3593676				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THOMPSON, PRESTON 1901 60TH PL E STE L 2450 BRADENTON, FL 34203			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) C/O HUGO ZEPEDA EPS-D3059 7801 N.W. 37 th ST. City DORAL, FL Zip Code 33166		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMPSON, PRESTON 1901 60TH PLA E STE L 2450 BRANDENTON, FL 34613	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMPSON, PRESTON 7801 N.W. 37 th ST. DORAL, FL 33166	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST THOMPSON, JUDY 1901 60TH PL E STE L2450 BRADENTON, FL 34613	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST THOMPSON, JUDY 7801 N.W. 37 th ST. DORAL, FL 33166	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			3/19/07 829-858-8503		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		