


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 02, 2007 8:00 am**  
**Secretary of State**

04-02-2007 90052 014 \*\*\*150.00

**DOCUMENT # F65773**

1. Entity Name  
**TROPIC AIRCRAFT, INC.**



Principal Place of Business  
**299 PARK STREET  
 MIAMI, FL 33166-4451 US**

Mailing Address  
**PARK AVENUE GROUP INC  
 2501 SE AVIATION WAY, STE 0  
 STUART, FL 34996 US**

**DO NOT WRITE IN THIS SPACE**

40047800



03282007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-2160082</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**GORDON, STEVEN I  
 4600 W. COMMERCIAL BLVD  
 SUITE 5  
 TAMARAC, FL 33319**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00          After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST DEE, WILLIAM E JR. 3461 SE KUBIN AVE STUART, FL 34997
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**DO NOT WRITE IN THIS SPACE**

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:  **William K. Dee, Jr.** 3/28/07 772-283-6220  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #