

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000076191

Entity Name: TROPIX EXPRESS, INC.

FILED  
Mar 10, 2004  
Secretary of State

## Current Principal Place of Business:

5141 EAST PERIMETER ROAD  
HANGER 37  
FORT LAUDERDALE, FL 33309

## New Principal Place of Business:

2211 NW 55 COURT  
HANGAR 12  
FORT LAUDERDALE, FL 33309

## Current Mailing Address:

2501 S PALMAIRE DR  
203  
POMPANO BEACH, FL 33069

## New Mailing Address:

FEI Number: 65-0468588      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WELLS, CARITA M  
1435 WEST BUSCH BLVD.  
SUITE A  
TAMPA, FL 33612 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: SMITH, BETTY A  
Address: HIGH VISTA P O BOX N1641  
City-St-Zip: NASSAU BAHAMAS,

Title: DST ( ) Delete  
Name: PFENNINGER, ASTRID  
Address: 851 S.W. 1ST AVE.  
City-St-Zip: POMPANO BCH., FL 33060

Title: DP ( ) Delete  
Name: PARISH, CHRISTINA R  
Address: 2501 S PALMAIRE DR APT 203  
City-St-Zip: POMPANO BEACH, FL 33069

Title: DVP ( ) Delete  
Name: BURROWS, ALAN J  
Address: EDEN ESTATE  
City-St-Zip: NASSAU, BAHAMAS,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DST (X) Change ( ) Addition  
Name: MURRAY, CASSANDRA M  
Address: 1125 FAIRFAX LANE  
City-St-Zip: FT. LAUDERDALE, FL 33326

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN J. BURROWS

DVP

03/10/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date