

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K78429

FILED
Jan 08, 2004
Secretary of State

Entity Name: TROPICAL ALLIANCE CORP.

Current Principal Place of Business:

6760 SW 98TH STREET
MIAMI, FL 33156 US

New Principal Place of Business:

6760 SW 98TH STREET
PINECREST, FL 33156 US

Current Mailing Address:

6760 SW 98TH STREET
MIAMI, FL 33156 US

New Mailing Address:

6760 SW 98TH STREET
PINECREST, FL 33156 US

FEI Number: 65-0109559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBOSS, L. GARY
6760 SW 98TH STREET
MIAMI, FL 33156 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: PD () Delete
Name: LEBOSS, GAIL,
Address: 6760 SW 98TH STREET
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEBOSS, GAIL,
Address: 6760 SW 98TH STREET
City-St-Zip: PINECREST, FL 33156

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: GAIL R. LEBOSS

PRES

01/08/2004

Electronic Signature of Signing Officer or Director

Date