

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000004046

**Entity Name:** TROPICAL DELIVERY SERVICES INC

**Current Principal Place of Business:**

7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702

**Current Mailing Address:**

4811 GREENBRIER ROAD  
RALEIGH, NC 27603 US

**FEI Number:** 46-4512837

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS INC.  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 US

*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:** BILL HAVRE

**02/17/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name AXELROD, BRIAN  
Address 4811 GREENBRIER ROAD  
City-State-Zip: RALEIGH NC 27603

Title VP  
Name AXELROD, IVANA  
Address 4811 GREENBRIER ROAD  
City-State-Zip: RALEIGH NC 27603

*I hereby 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 all other like empowered.*

**SIGNATURE:** BRIAN AXELROD

**PRESIDENT**

**02/17/2023**

Electronic Signature of Signing Officer/Director Detail

Date