## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000034678

Entity Name: TROPICAIRE DEVELOPMENT, INC.

**Current Principal Place of Business:** 

9769 S. DIXIE HWY SUITE 201 MIAMI, FL 33156

**Current Mailing Address:** 

9769 S. DIXIE HWY SUITE 201 MIAMI, FL 33156 US

FEI Number: 65-0424284 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OGDEN, RICHARD W 9769 S DIXIE HIGHWAY SUITE 201 MIAMI, FL 33156 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:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PD Title VS

Name RICHARD W OGDEN Name KRISTIN LEEDS

Address 5590 SW 92 ST Address 9769 S DIXIE HIGHWAY # 201

City-State-Zip: MIAMI FL 33156 City-State-Zip: MIAMI FL 33156

Title VP

Name OGDEN, ANDREW J MR.

Address 9769 S. DIXIE HWY

SUITE 201

City-State-Zip: MIAMI FL 33156

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: RICHARD W OGDEN

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/14/2017

Date

FILED Feb 14, 2017

**Secretary of State** 

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