

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000051378

Entity Name: TROPICAL HOMES GROUP LLC

Current Principal Place of Business:

8249 N.W 36TH STREET
SUITE #112
DORAL, FL 33166

Current Mailing Address:

8249 N.W 36TH STREET
SUITE #112
DORAL, FL 33166

FEI Number: 46-2513039

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORGANTI, ALFREDO E
8249 N.W 36TH STREET
SUITE #112
DORAL, FL 33166 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

Date

Authorized Person(s) Detail :

Title	MGR
Name	MORGANTI, ITALO A
Address	8249 N.W 36TH STREET
City-State-Zip:	DORAL FL 33166
Title	MANAGER
Name	MORGANTI, ALBERTO A
Address	8249 N.W 36TH STREET SUITE #112
City-State-Zip:	DORAL FL 33166

Title	MANAGER
Name	MORGANTI, ALFREDO E
Address	8249 N.W 36TH STREET SUITE #112
City-State-Zip:	DORAL FL 33166

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALFREDO E MORGANTI

DIRECTOR

01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date