2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006
Secretary of State

DOCUMENT# 156138

Entity Name: TROPICAIRE DRIVE-IN THEATRE, INC.

Current Principal Place of Business:

9769 SOUTH DIXIE HIGHWAY
STE 201
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

9769 SOUTH DIXIE HIGHWAY
STE 201
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 59-0586981 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DANIELS, NICHOLAS M ESQ
ONE SE 3 AVE STE 2400
MIAMI, FL 33131 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:	P	( ) Delete
Name:	DANIELS, NICHOLAS M ESQ.	
Address:	SUNTRUST INTERNATIONAL CTR 1 SE 3 AVE 2400	
City-St-Zip:	MIAMI, FL 33131	
Title:	AS	( ) Delete
Name:	OGDEN, RICHARD W	
Address:	5590 SW 92 ST	
City-St-Zip:	CORAL GABLES, FL 33156	
Title:	D	( ) Delete
Name:	MCCOMAS, ELEANOR	
Address:	9901 SW 87 CT.	
City-St-Zip:	MIAMI, FL 33716	
Title:	VPD	( ) Delete
Name:	MC COMAS, JOHN K	
Address:	14355 SW 232 ST	
City-St-Zip:	MIAMI, FL 33170	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 Chapter 119, 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: JOHN KEITH MCCOMAS VPD 04/17/2006

Electronic Signature of Signing Officer or Director Date