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**PROFIT** CORPORÁTION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F17408

TROPIC GARDEN INVESTMENTS, INC.

Principal Place of Busine	ess
% ANSUAREZ. RENE	•
6925 SW 8TH ST MIAMI FL 33144	
MIAMI PL 33144	•

## **FILED** Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90007 049 \*\*\*150.00



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Principal Place	e of Business	Mailing Address		<del></del>	( 1991189 11911 11911 11911 11911 11911			-
% ANSUAREZ. RENE			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed					
					01/26/1981	1		'
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	App	lied For	en .
21		26		•	59-2077430	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A		. 1
22		27			3. Certificate of Status Desired	Fee Red	quired	ļ,
City & Stat	е	City & State			6. Election Campaign Financing	\$5.00		ļ
23	t de la companya del companya de la companya del companya de la co	28		<del></del>	Trust Fund Contribution	Added to	Fees	}
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year		□No	i
24	25	29	30]	÷-	Personal Property Tax.  10. Name and Address of New Register	-	LINU	1
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Register	eu Agent		1 .
ANG	UAREZ, RENE						· . ·	
	SW 8TH ST	Ľ		82 Street Add	ress (P.O. Box Number is Not Acceptable)	sterios is mentos	on the state of the state of	
MIA	MI FL,33144	* .		83				]
				84 City		L 85 Zip C		}
TA LOSSION OF F	to the provisions of Sections 607.0502 registered agent, or both, in the State of the familiar with, and accept the obligation	t Florida. Such change was a	autnonzec	i by the corborati	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	e of changing its in pointment as reg	registered pistered	
SIGNATURE					ad when reinstating) DATE			
12.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	E: Registered	Agent signature require				حە ⊢
		DIDECTORS	13		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	ଡ୍ର
	r"	DIRECTORS	13.	ne ·	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	11/9
TITLE	PD		1,1 TI		ADDITIONS/CHANGES TO OFFICERS			34.(11/9
TITLE NAME	PD Ansuarez, Rene		1,1 TII 1,2 NA		ADDITIONS/CHANGES TO OFFICERS			E0347(11/9
TITLE NAME STREET ADDRESS	PD ANSUAREZ, RENE 6925 SW 8TH ST		1.1 TO 1.2 NA 1.3 ST	ME REET ADDRESS	ADDITIONS/CHANGES TO OFFICERS			R2E0347(11/9
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANSUAREZ, RENE 6925 SW 8TH ST MIAMI FL		1.1 TO 1.2 NA 1.3 ST	ME REET ADDRESS TY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS			CR2E034 (11/98)
NAME STREET ADDRESS CITY-ST-ZIP	PD ANSUAREZ, RENE 6925 SW 8TH ST MIAMI FL STD	☐ DELETE	1.1 TII 1.2 NA 1.3 ST 1.4 CI	ME REET ADDRESS TY-ST-ZIP TLE	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition	CR2E034 (11/9
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD ANSUAREZ, RENE 6925 SW 8TH ST MIAMI FL STD GOMEZ, NESTOR	☐ DELETE	1.1 TT 1.2 NA 1.3 ST 1.4 CF 2.1 TT 2.2 NA	ME REET ADDRESS TY-ST-ZIP TLE	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition	CR2E034 (11/9
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PD ANSUAREZ, RENE 6925 SW 8TH ST MIAMI FL STD GOMEZ, NESTOR 6925 SW 8TH ST MIAMI FL	☐ DELETE ☐ DELETE	1.1 TIT 12 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 C 3.1 TT 3.2 NA 3.3 ST 3.4 C 4.1 TT 4.2 NA 4.3 ST 4.4 CI 5.1 TT 5.2 NA 5.3 ST 5.4 CI 6.1 TT 6.1 TT 1.5	ME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE MME		☐ Change ☐ Change ☐ Change	Addition  Addition  Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANSUAREZ, RENE 6925 SW 8TH ST MIAMUFL STD GOMEZ, NESTOR 6925 SW 8TH ST MIAMI FL	☐ DELETE ☐ DELETE ☐ DELETE	1.1 TIT 12 NA 1.3 ST 1.4 CF 2.1 TIT 2.2 NA 2.3 ST 2.4 CF 3.1 TIT 3.2 NA 3.3 ST 3.4 CF 4.1 TIT 4.2 NA 4.3 ST 4.4 CF 5.1 TI 5.2 NA 5.3 ST 5.4 CF 6.1 TI 6.2 NA	ME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE MME		☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

**SIGNATURE** 

305/36/-3526