SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN -8 AM 9:49

DOCUMENT # **G22262** **(1)**

1. Corporation Name
TROPICAL BUILDING MAINTENANCE, INC.

Principal Place of Business	Mailing Address
6910 MIRAMAR PARKWAY SUITE 300 MIRAMAR FL 33025	6910 MIRAMAR PARKWAY SUITE 300 MIRAMAR FL 33025

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/13/1983
3a. Date of Last Report: 07/08/1994

2. Principal Place of Business	2a. Mailing Address
21 6910 MIRAMAR PARKWAY	26 6910 MIRAMAR PARKWAY
Suite, Apt. #, etc. 22 # 300	Suite, Apt. #, etc. 27 # 300
City & State 23 MIRAMAR FL	City & State 28 MIRAMAR FL
Zip / Country 24 33025 / 25 BROWARD	Zip / Country 29 33025 / 30 BROWARD

4. FEI Number: 59-2301705 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under s. 199.032, Florida Statutes* ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

TAGGART, BETTY
6910 MIRAMAR PARKWAY
SUITE 300
MIRAMAR FL 33028

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: BETTY TAGGART (Signature, type or print name of registered agent, and title if applicable) Betty Taggart (NOTE: Registered Agent's signature required when reinstating) 6/6/95 (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST	11 TITLE	☐ Change ☐ Addition
NAME	TAGGART, BETTY	12 NAME	
STREET ADDRESS	2612 EVERGLADES DRIVE	13 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL	14 CITY-ST-ZIP	
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: BETTY TAGGART Betty Taggart 6/6/95 305-435-4102
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)

0030736 CP