2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G43520

FILED Apr 30, 2006 Secretary of State

Entity Name: TROPICAL ENTERPRISES AND BROKERS, INC.

Current Principal Place of Business:				New Prince	New Principal Place of Business:		
4796 49TH SAINT PE	HAVE N TERSBURG, F	L 33714					
Current Mailing Address:				New Maili	New Mailing Address:		
PO BOX 6 ST PETER	0516 RSBURG, FL 3	3784					
FEI Number	: 59-2301149	FEI Number A	pplied For()	FEI Number Not App	licable () Certificate of Status Desi	red ()	
Name and	d Address of C	urrent Regist	tered Agent:	Name and	I Address of New Registered Agent		
4796 49TH	R, KENNETH R H AVE N TERSBURG, F		S	WILEY, DE 4796 49TH SAINT PE			
	e named entity s e of Florida.	submits this sta	atement for the p	urpose of changing i	its registered office or registered agen	t, or both,	
SIGNATU	RE: DEBRAS	s. WILEY			04/30/2006		
	Electron	ic Signature o	Registered Age	nt	Date		
Election Car	mpaign Financing	g Trust Fund Co	ntribution ().				
OFFICER	S AND DIREC	TORS:		ADDITION	NS/CHANGES TO OFFICERS AND D	IRECTO	
Title: Name:	PTD () MUELLER, KEN			Title: Name:	D (X) Change () Addition MUELLER, KENNETH R.,		
Name. Address: City-St-Zip:	507 LOOKOUT LARGO, FL	COURT		Address: City-St-Zip:	507 LOOKOUT COURT LARGO, FL		
Address: City-St-Zip: Title: Name: Address:	507 LOOKOUT LARGO, FL	Delete LT, D.					
Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	507 LOOKOUT LARGO, FL D () MUELLER, WA 6579 PEARL RI PARMA HTS., C	Delete LT, D. DH Delete		City-St-Zip: Title: Name: Address:	LARGO, FL		
Address:	507 LOOKOUT LARGO, FL D () MUELLER, WA 6579 PEARL RI PARMA HTS., C VP () WILEY DEBRA 4796 49TH AVE ST. PETERSBU	Delete LT, D. Delete E. NORTH RG, FL Delete		City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	LARGO, FL () Change () Addition P (X) Change () Addition WILEY DEBRA, 4796 49TH AVE. NORTH		

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: [DEBRA S. WILEY	Р	04/30/2006
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