2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

DOCUMENT# H38727

Entity Name: TROPICAL VALUES, INC.

Current Principal Place of Business:

8000 NW 7TH STREET
P.O. BOX 525400
MIAMI, FL 331264008

New Principal Place of Business:

Current Mailing Address:

8000 NW 7TH STREET
P.O. BOX 525400
MIAMI, FL 331264008

New Mailing Address:

FEI Number: 59-2485854 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLOUNT, GREGORY L
8000 NW 7TH STREET
MIAMI, FL 33126 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: D ( ) Delete
Name: BLOUNT, GREGORY
Address: 8000 N W 7TH STREET
City-St-Zip: MIAMI, FL 33126

Title: S ( ) Delete
Name: RAPPAPORT, NANCY
Address: 8000 N W 7TH STREET
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete
Name: MARTINEZ, MARIO C
Address: 6451 N. FEDERAL HIGHWAY, STE. 1021
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete
Name: FETZER, FRED B
Address: 8000 NW 7 ST.
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: MURRAY, DAVID
Address: 8000 N.W. 7 STREET
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: HESS, WILLIAM
Address: 8000 NW 7TH STREET
City-St-Zip: MIAMI, FL 33126

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: DIAMOND, BETTY
Address: 8000 NW 7TH STREET
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NANCY RAPPAPORT S 01/07/2004

Electronic Signature of Signing Officer or Director — Date