2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J01694

1. Entity Name TROPIC TINT INTERNATIONAL, INC.



FILED Mar 12, 2007 08:00 AM **Secretary of State**

Applied For

Not Applicable

Principal Place of Business

317 S FEDERAL HWY STUART, FL 34994 Mailing Address

317 S FEDERAL HWY STUART, FL 34994



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

No Chg-P CR2E034 (11/05)

\$8.75 Additional 5. Certificate of Status Desired

4. FEI Number 59-2647356

SCHULTZ, JOANNE

317 S FEDERAL HWY STUART, FL 34994			IN THIS SPACE		
the obligati	ons of registered agent.			oth, in the State of Florida. I am familiar with, and accept	
े ताहा • FILI	Signature, typed or printed name of registered agent and title E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	Agent signature required when reinstating) cing \$5.00 May Be Added to Fees	DATE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP SCHULTZ, JOANNE N. 317 S FEDERAL HWY STUART, FL	CTORS	DO	000000662421 03/21/07-80012-016 150.00 NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		•	IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-7IP				, , , , , , , , , , , , , , , , , , , ,	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an express, with all other like empowered.