

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:34

DOCUMENT # **K48290** (6)
1. Corporation Name
TROPIKAR SALES, INC.

Principal Place of Business Mailing Address
C/O MANUEL FERNANDEZ JR. **C/O MANUEL FERNANDEZ JR.**
113 N.W. 2ND AVE. **113 N.W. 2ND AVE.**
FT. LAUDERDALE FL 33311 **FT. LAUDERDALE FL 33311**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		12/01/1988	03/18/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		65-0082786	Not Applicable
City & State		City & State		5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	25	29	30		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
* FERNANDEZ, MANUEL JR. 113 N.W. 2ND AVE. FT. LAUDERDALE FL 33311				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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when handling)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERNANDEZ, MANUEL JR.	1.2 NAME	
STREET ADDRESS	1113 MANDARIN ISLE	1.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	1.4 CITY - ST - ZIP	
TITLE	TD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERNANDEZ, MANUEL JR.	2.2 NAME	
STREET ADDRESS	1113 MANDARIN ISLE	2.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	2.4 CITY - ST - ZIP	
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOURDES, FERNANDEZ	3.2 NAME	
STREET ADDRESS	1113 MANDARIN ISLE	3.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or biennial annual report was true and accurate and that my appointment shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the officer or director authorized 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 in the attachment with an address.

SIGNATURE: _____ DATE: 1-12-95 305-763-3740
Signature and typed or printed name of signing officer or director