

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# L54224

**FILED**  
**Apr 08, 2014**  
**Secretary of State**

**Entity Name:** TROPICAL PAINTING & DESIGN, INC.

**Current Principal Place of Business:**

101 SE 7TH STREET #16  
DEERFIELD, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

101 SE 7TH STREET #16  
DEERFIELD, FL 33441

**New Mailing Address:**

**FEI Number:** 65-0180402

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BEST, JEFF D PRES  
1625 WEST LAKE DRIVE  
LORIDA, FL 33857 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:** JEFF D BEST

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PS  
**Name:** BEST, JEFFERY D.  
**Address:** 1675 WEST LAKE DRIVE  
**City-St-Zip:** LORIDA, FL 33857

**Title:** VPT  
**Name:** BRETSCH, PETER R.  
**Address:** 2201 NE 34 COURT  
**City-St-Zip:** LIGHTHOUSE POINT, FL 33064

I hereby 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 all other like empowered.

**SIGNATURE:** JEFFERY D BEST

PRES

04/08/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date