

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L67728

FILED
Mar 27, 2009
Secretary of State

Entity Name: TROPICAL GREENHOUSES INC.

Current Principal Place of Business:

16985 SW 232 ST.
MIAMI, FL 33170 US

New Principal Place of Business:

Current Mailing Address:

C/O DESMOND CHIN
16985 SW 232 ST.
MIAMI, FL 33170 US

New Mailing Address:

FEI Number: 65-0187048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIN, DESMOND
15151 SW 45TH LANE
MIAMI, FL 33185 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: CHIN, DESMOND
Address: 15151 SW 45 LANE
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: CHUNG, WAYNE
Address: 15950 SW 252 ST
City-St-Zip: GOULDS, FL 33031

Title: DS () Delete
Name: SMITH, JASON P
Address: 15950 SW 252 ST
City-St-Zip: GOULDS, FL 33031

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:

I hereby certify that the information supplied with this filing does not qualify 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: DESMOND CHIN

D

03/27/2009

Electronic Signature of Signing Officer or Director

Date