ANNU	PROFIT RPORATION JAL REPORT		Sandra Secret	ARTMENT OF STATE B. Mortham tary of State		997 8:00am ary of State
	1997 MENT # M	97560	(O)	CORPORATIONS		
	IDATED TROPIC/		CERS, INC.		A ARANA KA KA KAKA ANA ANA ANA ANA ANA ANA A	
ncipal Place of Business) LOVEGREN LANE			Mailing Address P.O. BOX 25394			
Cone G Inton Fl	ROVE ROAD L 33534	TAN US	MPA L 33622-5394		3. Date Incorporated or Qualified	3a. Date of Last Report
rincipal P	Place of Business	2a.	Mailing Address		09/08/1988 4. FEI Number	05/01/1996 Applied For
uite, Apt	#, etc.	26	Suite, Apt. #, etc.		59-2910330	Not Applicable
ity & Stat	· · · · · · · · · · · · · · · · · · ·	27	City & State		5. Certificate of Status Desired	Eul Fee Required
		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
ιp	Count 25	29	Zip	Country 30		Yes No
ROB	9, Name and Addr BINS, R. JAMES, JR	ess of Current Regis	tered Agent	81 Name	10. Name and Address of New Rec	gistered Agent
C/0	HILL, WARD & HEN			82 Street Add	sess (P.O. Box Number is Not Acceptable	le)
						,
	E. KENNEDY BLVD., IPA FL 33602			83		,
TAM	e. Kénnedy Blvd., IPA Fl 33602	SUITE 3700	07.1508, Florida Stati da. Such change wat	83 84 City		FL 85 Zip Code
TAM Porsuant office or e ligent 1 a	E. KENNEDY BLVD., IPA FL 33602	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of	if applicable. (NC CTORS	83 84 City	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered at the appointment as registered
TAM Pursuant office or e agent 1 a	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Strature typed a ponted nam	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	if applicable. (NC	83 84 City utes, the above-named cor s authorized by the corpora Florida Statutes.	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered to the appointment as registered
TAM Pursuant Office or r Igent 1 a IATURE	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	if applicable. (NC CTORS	83 84 City vites, the above-named cor s authorized by the corpora Florida Statutes. 11 11 12 NAME 1.3 STREET ADDRESS	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered at the appointment as registered DATE DATE CRS AND DIRECTORS IN 12 Change Addition
TAM Pursuant Office or r Igent 1 a IATURE	E. KENNEDY BLVD., IPA FL 33602	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	if applicable. (NC CTORS	83 84 City utes, the above-named cor s authorized by the corpora Florida Statutes. 01E Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered the appointment as registered DATE ERS AND DIRECTORS IN 12 Change Addition
TAM Pursuant Diffice or r agent 1 a IATURE ADDRESS SI-ZIP	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	if application (NC CTORS	83 84 City vites, the above-named cor s authorized by the corpora Florida Statutes. 11 12 NAME 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered at the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition
TAM ² Ursuant Ursuant Igent La Igent La IATURE ADORESS I- ZIP ADDRESS	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	if application. (NC CTORS DELETE		poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered the appointment as registered DATE
TAM ² Ursuant Ursuant Igent La Igent La IATURE ADORESS I- ZIP ADDRESS	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	if application (NC CTORS	83 84 City vites, the above-named cor s authorized by the corpora Florida Statutes. CITE Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered at the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition
ADDRESS	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	if application. (NC CTORS DELETE	83 84 City utes, the above-named cors southorized by the corporal Florida Statutes. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 14 CiTY-ST-ZIP 21 TITLE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered the appointment as registered DATE
TAM Pursuant office or r agent 1 a IATURE ADORESS ST-ZIP ADORESS ADORESS	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	if application. (NC CTORS DELETE	83 84 City utes, the above-named cors southorized by the corporation Florida Statutes. DTE Registered Agent signature requination 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered the appointment as registered DATE
TAM Pursuant office or r agent 1 a IATURE I ADORESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	If application. (NC CTORS DELETE DELETE DELETE	83 84 City 94 City 95 96 97 98 101 11 12 13 14 17 97 14 17 14 17 14 17 14 17 14 17 14 17 14 17 14 17 14 17 14 17 17 14 17 17 11 11 12 14 17 17 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11	poration submits this statement for the plation's board of directors. I hereby accep	FL B5 Zip Code urpose of changing its registered bate DATE Change Addition DATE Change Addition Change Addition Change Addition
TAM Pursuant office or r agont 1 a IATURE I ADORESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	II applicatea. (NC CTORS DELETE DELETE DELETE DELETE	83 84 83 84 City utes, the above-named cors sauthorized by the corpora Fiorida Statutes. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 14 CiTY-ST-ZIP 21 TITLE 2.3 STREET ADDRESS 2.4 CiTY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CiTY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CiTY-ST-ZIP	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered atte appointment as registered DATE Change Addition Change Addition Change Addition Change Addition Change Addition
TAM Pursuant office or r agent 1 a NATURE I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	If application. (NC CTORS DELETE DELETE DELETE	83 84 City utes, the above-named cors suthorized by the corpora Fiorida Statutes. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 14 CiTY-ST-ZIP 21 TITLE 2.3 STREET ADDRESS 2.4 CiTY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CiTY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CiTY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	poration submits this statement for the plation's board of directors. I hereby accep	FL B5 Zip Code urpose of changing its registered bate DATE Change Addition DATE Change Addition Change Addition Change Addition
TAM Porsuant office or r agont 1 a IATURE I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	II applicatea. (NC CTORS DELETE DELETE DELETE DELETE	83 84 City utes, the above-named cors suthorized by the corpora Florida Statutes. DTE Registered Agent signature required 13. 11.1 12.8 13.5 14.017-ST-ZIP 21.111LE 22.111LE 23.5 24.017-ST-ZIP 3.1 3.1 3.1 3.2 4.017-ST-ZIP 3.1 3.1 3.2 3.3 STREET ADDRESS 3.4.017-ST-ZIP 3.1 3.1 3.2 3.3 STREET ADDRESS 3.4.017-ST-ZIP 4.1 4.2 1.1 11 3.2 3.3 3.4.017-ST-ZIP 4.1 4.2 1.1 1.1 1.1 1.1 1.1 1.1 2.4 2.7 3.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 <t< td=""><td>poration submits this statement for the plation's board of directors. I hereby accep</td><td>FL 85 Zip Code urpose of changing its registered atte appointment as registered DATE Change Addition Change Addition Change Addition Change Addition Change Addition</td></t<>	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered atte appointment as registered DATE Change Addition Change Addition Change Addition Change Addition Change Addition
TAM Pursuant olfice or r agent 1 a UATURE I ADDRESS SI-2IP I ADDRESS SI-2IP I ADDRESS SI-2IP I ADDRESS SI-2IP I ADDRESS SI-2IP	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	II applicatea. (NC CTORS DELETE DELETE DELETE DELETE	83 84 87 84 83 84 City 94 95 97 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 98 99 91 91 92 93 94 94 95 95 96 97 98 98 99 91 92 93 94 95 95 96 97 97 97 97 98 97 97 97 98 98 99 </td <td>poration submits this statement for the plation's board of directors. I hereby accep</td> <td>FL 85 Zip Code urpose of changing its registered the appointment as registered DATE DETES AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition</td>	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered the appointment as registered DATE DETES AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
TAM Pursuant office or r agent 1 a VATURE I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP	E. KENNEDY BLVD., IPA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stgnet.re. bred or pented new C PD TROUT, IRWIN B. 508 BARNES DR	SUITE 3700 Stions 607.0502 and 6 th, in the State of Floric cept the obligations of re of registered agent and table	I applicaba (NC CTORS DELETE DELETE DELETE DELETE DELETE	83 84 83 84 City utes, the above-named cors southorized by the corporations florida Statutes. DTE Registered Agent signature required 13. 11 TITLE 12. NAME 13. STREET ADDRESS 14 City-ST-ZIP 21 TITLE 22. NAME 23. STREET ADDRESS 2.4 City-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 City-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 City-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City-ST-ZIP 6.1 TITLE 6.2 NAME	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered the appointment as registered DATE DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition
TAM Pursuant office or a gent 1 a UATURE I ADDRESS SI-2IP	E. KENNEDY BLVD., PA FL 33602 to the provisions of Sec registered agent, or bot am familiar with, and acc Stynature by ed & pointed men C PD TROUT, IRWIN B. 508 BARNES DR BRANDON FL	SUITE 3700	I applicaba (NC CTORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	83 84 City Utes, the above-named cors suthorized by the corpora Florida Statutes. DTE Registered Agent signature required 13. 11.1 12.8 13.5 14.017+ST-ZIP 21.111LE 22.NAME 23.5 24.017+ST-ZIP 3.1 3.1 3.2 4.017+ST-ZIP 3.1 3.1 3.2 3.3 STREET ADDRESS 3.4.017+ST-ZIP 3.1 3.1 3.2 3.3 STREET ADDRESS 3.4.017+ST-ZIP 3.1 4.1 11LE 5.2 NAME 3.3 STREET ADDRESS 3.4.017+ST-ZIP 5.1 5.1 5.1 5.2 5.3 5.4 6.1 6.3 6.4 6.4 6.4 6.4 6.4 6.4	poration submits this statement for the plation's board of directors. I hereby accep	FL 85 Zip Code urpose of changing its registered the appointment as registered DATE ERS AND DIRECTORS IN 12 Change Addition Change Addition