

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N09000010113

**FILED**  
**May 28, 2013**  
**Secretary of State**

**Entity Name:** TROPICAL S L CORP

**Current Principal Place of Business:**

1142 SW 30TH STREET  
PALM CITY, FL 34990 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1407  
PALM CITY, FL 34990 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PALMA, ARTURO  
2505 INDIANRIVER DRIVE  
LOT # 419  
JENSEN BEACH, FL 34957 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: ARTURO PALMA

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SUAREZ, MARIO J  
Address: 1142 SW 30TH STREET  
City-St-Zip: PALM CITY, FL 34990 US

Title: VP  
Name: ARTURO, PALMA  
Address: 2505 INDIANRIVER DRIVE LOT #419  
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: SEC  
Name: PALMA, CRISTOBAL  
Address: 2505 INDIANRIVER DRIVE LOT #419  
City-St-Zip: JENSEN BEACH, FL 34957 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIO SUAREZ

P

05/28/2013

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

\_\_\_\_\_  
Date